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BOROUGH OF STRET FORD

ANNUAL REPORT

OF THE

Medical Officer of Health

1965

Including the Report of the
Chief Public Health
Inspector

**PUBLIC HEALTH DEPARTMENT,
TOWN HALL,
STRET FORD,
TRAFFORD PARK 2101.**



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PUBLIC HEALTH DEPARTMENT,
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TRAFFORD PARK 2101.

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BOROUGH OF STRET福德
HEALTH COMMITTEE
1965

Chairman :

Councillor G. MARLAND

Deputy Chairman :

Councillor Mrs. M. HINDLEY

Alderman H. F. Fox
Alderman E. Reid
Councillor E. Bott
Councillor A. S. Clough
Councillor H. Davies
Councillor H. H. Jones
Councillor M. L. Merritt
Councillor R. Moores

PUBLIC HEALTH OFFICERS OF THE
LOCAL AUTHORITY
1 9 6 5

Medical Officer of Health:

Wm. SHARPE, M.B., Ch.B., D.P.H., B.Sc.
(Divisional Medical Officer, Health Division No. 16,
Lancashire County Council)

Deputy Medical Officer of Health :

MARJORIE T. DARE, M.B., Ch.B., D.P.H.
(Senior Assistant Divisional Medical Officer,
Health Division No. 16, Lancashire County Council)
(Appointed April, 1965)

Staff of the Public Health Department

Chief Public Health Inspector and Cleansing Director:

* J. KAY, C.S.I.B., M.Inst.P.C., D.P.A. (London)

Deputy Chief Public Health Inspector :

*† J. C. ANKERS, C.S.I.B.

Public Health Inspectors :

*† G. C. TAYLOR, C.S.I.B.

* F. G. ORNSBY-DOBSON, C.S.I.B.

* G. KLEPPER, C.P.H.I.B.

* I. W. BARKER, C.P.H.I.B.
(Resigned April 1965)

* R. ABBEY, C.P.H.I.B.

* N. A. M. BOGA, C.P.H.I.B.
(Resigned July 1965)

* J. A. HARPER, C.P.H.I.B.

* J. F. HARTLEY, C.P.H.I.B.
(Appointed September 1965)

* D. BOTTOMLEY, C.P.H.I.B.
(Appointed October 1965)

A. D. MOSS, C.P.H.I.B.
(Appointed December 1965)

Chief Clerk :

C. B. WARDLE

* Certified Meat and Food Inspectors

† Certified Smoke Inspectors

Staff of the Health and Welfare Services Department

Assistant Medical Officers of Health :

MARJORIE T. DARE, M.B., Ch.B., D.P.H.
(resigned 31.3.65)

A. HARGREAVES, M.B., Ch.B., D.P.H.

L. M. MAYER-JONES, L.R.C.P., M.R.C.S.
(commenced 8.7.65)

PHOEBE J. M. ARMSTRONG, M.B., Ch.B., C.P.H., B.Sc.
(part-time, seconded from Health Division 16)

Dental Officers :

(Lancashire County Council)

J. S. HIGHAM, B.D.S.

P. D. ROBINSON, L.D.S.

J. CLARKSON, B.D.S.

Health Visitor/School Nurses :

Mrs. F. K. ANTONIE

(commenced 1.8.65)

Miss K. BELL

Mrs. M. DALY

(commenced 14.12.65)

Mrs. P. HOBBS

(commenced 15.11.65)

Mrs. E. JONES

Mrs. E. M. LENART

Mrs. C. LYNCH

Mrs. J. H. MOYES

(Resigned 30.9.65)

MISS S. McGAHAN

Miss F. SHARPLES

Mrs. A. I. R. SUMIRA

T.B. Visitor :

Mrs. H. A. SAVAGE

(part-time, seconded from Health Division 16)

(Resigned 31.10.65)

Domiciliary Midwives :

Mrs. P. BUTCHER

Mrs. J. MOSS

(commenced 5.7.65)

Mrs. M. GILLIGAN

Mrs. J. McKENNA

Mrs. M. GRAY

Miss M. A. THOMPSON

Miss S. GRIFFIN

District Nurses :

Mr. S. CABON

Miss M. LAYCOCK

Mrs. S. M. BOND

Mrs. M. MOORHOUSE

Miss A. G. BUDGETT

Mrs. M. G. ROBERTS

(commenced 26.4.65)

(resigned 31.5.65)

Mrs. J. DELANEY

Mrs. M. WEBSTER

Mrs. M. JORDAN

Mental Welfare Officers :

E. B. LAWSON
(commenced 31.8.65)

J. LAUGHTON

J. C. RATCLIFFE
(resigned 5.9.65)

Miss M. P. HARGAN
(Part-time Officers, seconded from Health Division 16)

Welfare Organiser :

R. N. THOMAS
(Part-time, seconded from Health Division 16)

Home Help Organiser :

Miss M. ROBERTS

Senior Administrative Officer :

M. H. HODGETT

ANNUAL REPORT
of the
MEDICAL OFFICER OF HEALTH
for the
YEAR ENDED 31st December, 1965

To the Chairman and Members of the Health Committee.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present the Annual Report on the health of the Borough of Stretford for the year 1965.

VITAL STATISTICS

Population

The Registrar General estimates the population of the Borough at mid-year 1965 at 60,280 which shows no significant variation on the estimated population for the previous year. The census population in 1961 was 60,364 compared with the previous census figure ten years earlier of 61,874.

Birth Rate

The number of live births registered during the year was 1,171, a decrease of 96 on the previous year ; of the 1,171 recorded births 607 were boys and 564 girls. The adjusted birth rate per thousand of the estimated population was 19·8 somewhat above the national average for England and Wales which was 18·1.

There was a total of 134 illegitimate births, an increase of 23 on the recorded figure for 1964. Expressed as a percentage 11·5% of all live births were born out of wedlock.

The number of still births recorded was 28 giving a still birth rate per thousand total births of 23·4.

Death Rate

The adjusted death rate per thousand of the estimated population was 13·5, a little above the rate for England and Wales which was 11·5.

During the year 674 deaths were registered, 364 males and 310 females.

Each year attention has been drawn to the two major causes of death cardio vascular disease and cancer. The statistical table for the year under review once again indicates that there are no grounds for optimism as far as these diseases are concerned. Coronary artery disease alone accounted for 168 deaths of whom 108 were men, this compares with a total of 128 for the previous year.

There is no evidence to indicate that medical science is as yet making any real impact on the ever increasing mortality rate from this condition. Most workers are agreed that valuable results will only be achieved in the preventive field, and since this really means self discipline for the vulnerable age group, the desired end will be extremely hard to achieve.

Deaths from cancer of the lung and bronchus showed a marked increase during the year from 33 in 1964 to 44 in 1965. The greatest proportional increase was in female deaths which rose from 3 in the previous year to 9 in the year under review. Too much emphasis should not, of course, be placed on this threefold increase since the figures are much too small to be statistically valid, nevertheless it is a little disturbing to see ones fears, of a marked upward trend in female deaths from this cause, given some support. Accepting the main causal agent of cancer of the respiratory system to be cigarette smoking, and there is overwhelming evidence in support of this thesis, female deaths from this cause could be expected to rise steadily over the next twenty-five years, just as male deaths have risen over the past twenty-five years. This is, of course, based on the evidence that the smoking habit of the ladies is approximately a quarter of a century behind that of the male population. Due to the very much smaller number of heavy smokers amongst females it is not anticipated that the mortality rate will ever reach such alarming proportions as that for the male. The ladies, however, ought to be warned by what is at present happening to their spouses.

Maternal Mortality

It is pleasing to report that no death associated with childbirth occurred during the year. This is the fifth year in succession in which there has been no maternal death.

Infant Mortality

The infant mortality rate for 1965 was 24·8 per thousand live births, which although the lowest rate recorded in the Borough since 1959 gives no cause for great rejoicing since it is still considerably above the national average of 19·0 per thousand live births. A total of 29 infants died under the age of one year, of these 23 died within the first four weeks of life, and 13 within 24 hours of birth.

Infectious Diseases

Notifiable infectious diseases gave rise to no serious problem throughout the year. No death was attributed to notifiable disease other than primary pneumonia and tuberculosis. The only disease to show any major incidence was measles, 452 cases of this illness were notified, the condition was, however, relatively mild only seven children requiring hospitalisation.

An effective vaccine is now available for the prevention of this disease but at the present time it is not suggested that mass vaccination campaigns should be mounted in this country. The vaccine is, however, obtainable by the general practitioner and may be used at his discretion. The argument against control of measles by mass vaccination is based mainly on the non-virulent nature of the disease and the better treatment available at the present time, giving a low mortality rate, and reduced incidence of complications. While agreeing with the official policy the position must be closely watched, and it is extremely difficult to argue cold statistics with a parent who has lost a child, or with one whose child has become deaf through contracting this disease. It must be remembered that during an epidemic year (usually every second year) over half a million children in England and Wales contract the disease and approximately one hundred die.

The reduction of the mortality rate to a tenth of what it was twenty years ago is probably mainly due to the more effective treatment of complications by modern antibiotics, but there is no guarantee that this happy state will continue and the position must be very closely watched.

In deciding for or against general vaccination against measles the nuisance value of the disease to the community must be given serious consideration. In our present society with many homes where both parents work full-time the advent of measles in the family may cause undue anxiety, and pose rather difficult problems, and for this reason alone it may well be an economic proposition as well as a humanitarian one to attempt to oust the disease completely by mass vaccination.

No case of diphtheria or poliomyelitis has been reported for fourteen and seven years respectively which can only be attributed to the success of the immunisation campaign against these diseases. It is, however, becoming increasingly difficult to maintain an adequate immunity index for both diseases, due mainly to the absence of the diseases from the community and the consequent loss of the "fear" stimulus.

We have received a very sharp reminder in the Lancashire area during the year that poliomyelitis is by no means conquered, and that unless a high vaccination rate is maintained an outbreak of the disease is a grave probability. The ultimate responsibility lies with the parent to see that his child is fully protected against these diseases for which facilities are freely available either through the family doctor, or infant welfare centre. There is no excuse for procrastination.

It is interesting to note that no case of food-poisoning was notified during the year. Is this purely fortuitous? or can the Health Department accept modest congratulations that at last

all the efforts that the Health team has put into educating canteen workers and other food handlers in kitchen hygiene is showing results?

Atmospheric Pollution

The number of deaths from Bronchitis, a total of forty, reminds us if any reminder was required that one of the main environmental health problems facing the health committee is the production of cleaner air for the citizens of the Borough to breathe.

The true incidence of chronic bronchitis is extremely difficult to determine, but there can be no doubt that it causes more distress and misery than any other disease, and also there is no doubt that one of the main contributing factors to the production of the disease is atmospheric pollution. It is unlikely that the air which the inhabitants of the Borough is condemned to breathe is ever likely to reach the purity standards of rural communities, but with full implementation of the Clean Air Act and the establishing of Smoke Control Areas to cover the entire Borough a dramatic improvement will be obtained. I realise that the health committee fully appreciate the need to proceed as fast as possible with the programme which has been outlined and that the only deterrents are economic, and the availability of technical manpower. The target date of 1970 for complete smoke control is a realistic one and the committee must be applauded for its determination to get on with the job.

Fluoridation of Water Supplies

In spite of continuing pressure by the Health Committee on the water undertakers Manchester City Council, and the Local Health Authority, Lancashire County Council, it is with some concern that I am unable to report any progress in the adjustment of the fluoride content of the water supplied to the residents of the Borough.

It would appear that large water undertakers have power of "veto" over those authorities to whom it is under contract to supply water, and this seems to be opposed to the usual democratic principle of which local government is so jealous. Since Manchester City Council has decided against the fluoridation of water supplies, and technical difficulties preclude adjustment at a local level, all children living in a considerable area of South-East Lancashire have therefore, been condemned to further years of pain and suffering associated with dental caries. Unless there is a change of heart by the water undertakers, it would appear that the only hope of having the wishes of the health Committee carried out is ministerial intervention. The central government who are obviously convinced of the efficacy and safety of the adjustment of the fluoride content to one part per million must have the courage of its convictions and give a much stronger lead in this

subject than it has been disposed to in the past. One hesitates to use the word "direction," but where so much is at stake regarding the health of future generations, and where so much conclusive evidence has been accumulated over a period of half a century, surely some form of pressure on reactionary local authorities is justifiable.

To argue as certain authorities do that fluoride should be administered by a vehicle other than water is quite invalid. There is no known satisfactory substitute for water if maximum benefit from this simple measure is to be obtained.

Housing

The question of priority for rehousing on health grounds continued to be dealt with by confidential report from the family doctor, in addition to reports from members of the Health Department staff. This system has worked satisfactorily, and my thanks are due to the medical practitioners in the area for their co-operation.

During the year 174 cases were dealt with of which 160 or 91 % warranted some degree of priority for health reasons.

The number of families approved for rehousing during the year who were allocated medical priority was 32. The majority of cases receiving consideration were for ground floor accommodation mainly from the handicapped elderly, who were unsuitably housed in accommodation on two floors.

There is still a considerable need to be met in this field, and it is pleasing to note that the Housing Committee fully appreciate this requirement, and have schemes for the provision of further special housing for the elderly. These schemes with a resident warden are invaluable as a contribution to the Welfare of the elderly, but it cannot be too strongly emphasised that the accommodation provided must either be all ground floor or have lifts installed.

PERSONAL HEALTH AND WELFARE SERVICES

Care of Mothers and Young Children

The child welfare centres were again well attended throughout the year, the number of children attending showing an increase of 70 on 1964. During the year 2,372 children made 13,620 attendances at the four clinics, within the Borough.

It does not seem to be fully appreciated even in certain medical circles just how much work is done by the staff at Child Welfare Centres. There would appear to be once again some considerable move to dispense with this service in its present form and to place the full responsibility for the care of mother and child on the family practitioner. I do not think anyone would disagree that in an ideal medical world this ought to be done but this happy state has not yet been achieved, and is unlikely to be reached in the foreseeable future. To

shift this very considerable load to the general practitioner at the present time does not seem to be practicable, and I am afraid would result in either a marked contraction of the service offered to the mother, or an unbearable additional strain on the family doctor. So long as the average general practitioner has to work at his present pace to keep up with his professional commitments, it is extremely difficult to see how he can accept further duties.

The issues of National Welfare Foods made during the year at the Infant Welfare Centres showed little variation from the previous year and would appear to have levelled off at the new lower level following the price increases imposed in 1961. A total of 9,129 tins of National Dried Milk, 1,326 bottles of Cod Liver Oil, 1,230 packets of Vitamins A and D tablets, and 12,777 bottles of orange juice, were issued.

The notification scheme for congenital abnormalities in the new born introduced on the 1st January, 1964, worked satisfactorily during the year. Out of a total of 1,219 births 18 infants were reported as having congenital defects compared with a total of 28 during the previous year. The various types of malformations are listed in the report.

The Borough is relatively well endowed with day nursery places, but is still quite unable to meet the demand from mothers who wish to go out to work. The needs of all priority cases whether on social or medical grounds are, however met, and these cases formed 71.4% of the total during the year. Two of the four day nurseries are designated as training nurseries for the N.N.E.B. qualification, but in spite of this it has been extremely difficult at various times during the year to maintain an adequate number of trained staff. The frequent undermanning of the service has put an additional strain on the remaining staff, and thanks are due to the senior staff at the nurseries for the maintenance of very high standards, under considerable pressure. At the time of writing there is still no indication of the starting date for the replacement of Victoria Park Day nursery. There is now some urgency about this project if serious unjustifiable maintenance costs on the fabric of the present building are to be avoided. The alternative would be to close this nursery down and try to absorb the priority cases in the other three nurseries. This action I am sure would meet with considerable disapproval within the Borough, and could result in real hardship in a number of instances. It is hoped, therefore, that early ministerial approval can be obtained for this replacement scheme.

In addition to the four nurseries maintained by the local authority, there is one 25 place and one 60 place day nursery registered under the Nurseries and Child Minders Regulation Act 1948. These nurseries are subject to regular supervision by the Health Department.

There was a marked increase in the number of unmarried mothers who were given assistance at the time of confinement. Twenty-four unmarried mothers were admitted to Mother and Baby Homes during the year compared with twelve during 1964. Admission to these homes is arranged through moral welfare societies, but all maintenance charges are met by the Local Health Authority.

It has been pointed out previously that no facilities are available within the Borough for advice on Family Planning. Women who require this advice are referred to family planning clinics in Salford, Eccles or Manchester which entails considerable travelling. In view of recent ministerial advice on this subject the matter has again been taken up with the Family Planning Association with a view to the establishment of a service within the area. It is fully appreciated, however, that the resources of this voluntary organisation are limited in means and in trained medical manpower, and that it may be some considerable time before such a service can be made available. If we are really serious about providing an adequate family planning service, and there is no more serious subject at the present time, it must be treated with much greater urgency, especially by the Local Health Authority. Local Health Authorities have now been empowered to establish their own service if they so desire and I feel that this ought to be given considerable priority by the committees concerned. It is fully appreciated that a pre-requisite of the setting up of family planning clinics by the Local Authority is the training of medical personnel in the specialised techniques involved, but training facilities could, and should, be made freely available at strategic hospital centres.

Midwifery Service

Out of a total of 1,219 live and still births during the year 220 were born at home, i.e. only 18% of all mothers were confined in their own homes. This very high rate of hospital confinement has been achieved not by the provision of additional beds but by curtailing the lying-in period. 474 mothers were discharged with their babies before the tenth day of the puerperium and a considerable proportion of these were sent home after 48 hours. The ever-increasing reduction of the hospitalisation time following confinement is resulting in a changing emphasis on the work of the domiciliary midwife whereby she is now required to devote a much larger percentage of her time to maternity nursing rather than acting as a midwife. If this trend continues, and it seems that this is the most likely future pattern, more thought must be given to the joint use of the Local Authority midwife with the hospital service, in order that the best use is made of the meagre amount of skilled labour in this field.

Health Visiting Service

The recruitment position as far as this service is concerned showed very little improvement during the year. At the end of the year only ten health visitors were in post against an establishment of fifteen. This depleted staff was quite inadequate to deal satisfactorily with the ever-increasing load which the health visitor is expected to shoulder. With her increased commitment in the field of welfare of the aged, the many screening procedures in which she is involved, the ever widening scope of health education, and in recent years a developing immigrant problem, added to her invaluable work in the field of Child Welfare, the health visitor's burden is indeed an onerous one, and one can only hope that the staffing position will improve. There is no real hope that this in fact will happen, and it may well be that the position will deteriorate further. This latter observation is made with one eye on the raising of academic standards for entrance to the nursing profession in general, and to the Health Visitors' course in particular. One is a little apprehensive regarding the re-orientation of the new training course prepared by the Council for the Training of Health Visitors. The first Health Visitors from the new course will emerge in 1966 and there is, I fear, a grave risk of making them and their successors second class social workers rather than first class Health Visitors. The Health Visitor must always remain primarily a medical worker in the field to which duties she brings a specific knowledge and understanding not possessed by the social scientist, and a satisfactory training course must be fashioned to foster these special attributes. On looking at the new syllabus devised by the Training Council one wonders if this basic principle is not being lost sight of, by those responsible for its content. Admittedly there was some need for a "new look" but one wonders if the present approach is not just a little too radical and ought to be modified. A final judgement, however, must be reserved until the end product can be observed.

Prevention of Illness—Care and After Care

With the resignation during the year of the only specialised Tuberculosis Health Visitor, this work has now been allocated as part of the duties of the General Health Visitor. The extremely close link forged by the Tuberculosis Health Visitor with the local chest clinic has been maintained by the attendance of all Health Visitors at the clinic on a Rota basis. This has been achieved mainly through the goodwill and co-operation of the Chest Physician who is a most enthusiastic practitioner of preventive as well as curative medicine. For his invaluable help I should like to express my thanks.

The vaccination programme against tuberculosis for school leavers continued during the year. 821 children were tuberculin tested, and the 659 who were negative reactors were vaccinated with B.C.G. All positive reactors were referred for clinical investigation.

It will be noted under this section that the Laundry Service continued to expand. This service which supplies bed linen and incontinence pads to assist in the home nursing of the incontinent, was provided for 71 patients during the year, involving a total of 1,039 case weeks compared with 61 patients and 899 case weeks during 1964. A twice weekly collection and delivery to the home of the patient was maintained throughout the year.

The chiropody service provided free to the aged, the physically handicapped and expectant mothers increased from 28 sessions per month at the beginning of the year to 36 sessions at the end. During the year a total of 826 patients received 2,777 treatments, of which 26 patients received a total of 79 treatments in their own home.

Cervical Cytology

Towards the end of the year a clinic session was established for the taking of cervical smears. This most valuable preventive service which is designed to detect early cancerous changes allowing effective measures to be taken to prevent its spread could only be introduced on a minor scale.

The limit to the number of women who can be offered this screening test is set by the receiving laboratory responsible for the interpretation of the prepared slides. The receiving laboratory for this area is at Christie's hospital, Manchester, and this laboratory due to the demand on the very limited number of specially trained technicians, was unable to offer more than a maximum of ten slides per week, which has since been raised to fifteen. This meagre allocation has to cover an "at risk" female population of approximately 25,000 which would mean a period of nearly fifty years before each person could be tested once. Put in another way, since each person at risk ought to be screened at periods not longer than five years a minimum of 5,000 tests per year is required i.e. an approximate ten fold increase in the present allocation, before the service could be considered to be adequate. For obvious reasons, therefore, no serious publicity has been given to the availability of this service, other than to notify the local practitioners that a minimal service is available.

It is difficult to ascertain whether the extremely poor service offered in this area is exceptional, or whether similar conditions apply in other parts of the country. My feeling is that the dearth of trained technical assistants to cope with a major programme is general, and that in spite of the training schemes which have been established this bottle-neck is likely to be present for some time, unless considerably more priority is given by the hospital authorities to the training of technicians.

Welfare Services

The only major development during the year was the establishment by the Borough Council of two Luncheon Clubs for the elderly. One club meets in the Congregational Church Hall, Old Trafford and the other in the Civic Theatre, Stretford.

These two clubs were commenced as a result of a joint financial agreement between the Borough Council and the Local Welfare Authority (Lancashire County Council) to promote the provision of recreational and meals facilities for old people. The clubs are organised by the Borough Council, but staffed by voluntary workers. The meals are not cooked on the premises, but delivered daily by van, five days per week. The numbers attending the centres at Chorlton Road Congregational Church, and at the Civic Theatre, Stretford, are 20 and 25 persons per day respectively. Plans are going ahead to extend this most valuable service to other districts of the Borough, but with the ever-increasing need by the elderly for this type of service, it is doubtful if a sufficient number of voluntary staff will be available to man the service satisfactorily. It does seem that if the service is to be extended as one would like to see it, serious consideration will have to be given to the establishment of centres with full cooking facilities staffed by paid employees, on the pattern of the Civic Restaurant used to such advantage during the war years. Meals freshly cooked on the premises are obviously more acceptable and nutritionally more satisfactory than transported meals and for this reason alone one would like to see future development along the lines suggested.

At the end of 1965 there were 220 "substantially and permanently" handicapped persons on the register maintained by the department. Alterations and adaptations were carried out at the homes of six registered handicapped persons in an attempt to mitigate the effects of their disabilities.

Handicraft classes were held weekly at Lostock Clinic and these sessions were attended by 38 handicapped persons.

The voluntary clubs for the handicapped continued to flourish during the year reaching a membership of 90 persons.

In conclusion, I should like to report my appreciation of the help I have received from the staff of the Health Department throughout the year and in the preparation of this report, and I offer to you, Mr. Chairman, and members of the Health Committee, my most sincere thanks for your encouragement and support during the year.

I have Mr. Chairman, Ladies and Gentlemen,
the honour to be

Your obedient Servant,

WM. SHARPE,

Medical Officer of Health.

SECTION A.

STATISTICAL SUMMARY FOR THE YEAR 1965

Area (Statute Acres)	3,530
Registrar-General's estimate of resident population mid-1965	60,280
(Census, 1961)	60,364
(Census, 1951)	61,874
Number of Inhabited Dwellings (end of 1965), according to Rate Books (estimated)	18,612
Number of Inhabited Dwellings (Census, 1961) ...	18,477
Persons per acre	17.04
Number of Families or Separate Occupiers (Census, 1961)	19,459
Rateable Value	£3,520,021
Product of 1d. Rate	£14,288

VITAL STATISTICS BASED ON THE NET BIRTHS AND DEATHS AFTER CORRECTION FOR INWARD AND OUTWARD TRANSFERS AS FURNISHED BY THE REGISTRAR-GENERAL

				M.	F.	Total
Live births	{	Legitimate ...	...	535	502	1,037
		Illegitimate ...	...	72	62	134
				<hr/>	<hr/>	<hr/>
		Total ...	...	607	564	1,171
				<hr/>	<hr/>	<hr/>

Birth Rate per 1,000 of the estimated resident popu- lation (adjusted)	19.8
Still Births	28
Rate per 1,000 total (live and still) births	23.4
Deaths	674
Death Rate per 1,000 of the estimated resident popu- lation (adjusted)	13.5

The crude death rate of 11.2 per 1,000 population, after adjustment by the use of the comparability factor of 1.21 supplied by the Registrar-General, gives a death rate of 13.5 per 1,000, which is statistically comparable with the death rate for England and Wales of 11.5 per 1,000.

Deaths from Pregnancy, Childbirth and Abortion ...	None
Death Rate per 1,000 total (live and still) births ...	—
Death Rate of Infants under 1 year of age :	
All Infants per 1,000 live births	24·8
Legitimate infants per 1,000 legitimate live births	25·7
Illegitimate infants per 1,000 illegitimate live births	22·4
Death Rate of infants under 4 weeks of age :	
All infants per 1,000 live births	19·7
Death rate of infants under 1 week of age :	
All infants per 1,000 live births	18·6
All infants per 1,000 total (live and still) births...	18·4
Deaths from Cancer (all ages)	126
Deaths from Measles (all ages)	—
Deaths from Whooping Cough (all ages)	—
Deaths from Diarrhoea, Gastritis and Enteritis ...	—

The above statistical rates are based on a population of 60,280 as estimated by the Registrar-General at the middle of 1965.

CAUSES OF DEATH DURING THE YEAR 1965

Registrar-General's Classification.

						Males	Females
1.	Tuberculosis, respiratory	...	...	...	...	1	1
2.	Tuberculosis, other	...	...	...	...	1	—
3.	Syphilitic disease	...	...	...	...	—	1
4.	Diphtheria	...	...	...	...	—	—
5.	Whooping Cough	...	...	...	...	—	—
6.	Meningococcal infections	...	...	...	...	—	—
7.	Acute poliomyelitis	...	...	...	...	—	—
8.	Measles	...	...	...	...	—	—
9.	Other infective and parasitic diseases	...	...	...	...	—	1
10.	Malignant neoplasm, stomach	...	...	...	...	8	6
11.	„ „ lung, bronchus	...	...	...	...	35	9
12.	„ „ breast	...	...	...	...	—	8
13.	„ „ uterus	...	...	...	...	—	4
14.	„ „ (other sites)	...	...	...	...	32	24
15.	Leukaemia, alleukaemia	...	...	...	...	1	1
16.	Diabetes	...	...	...	...	2	—
17.	Vascular lesions of nervous system	...	...	...	...	40	52
18.	Coronary disease, angina	...	...	...	...	108	60
19.	Hypertension with heart disease	...	...	...	...	3	6
20.	Other heart disease	...	...	...	...	26	52
21.	Other circulatory disease	...	...	...	...	18	14
22.	Influenza	...	...	...	...	—	—
23.	Pneumonia	...	...	...	...	7	17
24.	Bronchitis	...	...	...	...	28	12
25.	Other diseases of respiratory system	...	...	...	...	4	—
26.	Ulcer of stomach and duodenum	...	...	...	...	5	2
27.	Gastritis, enteritis and diarrhoea	...	...	...	...	—	—
28.	Nephritis and nephrosis	...	...	...	...	1	1
29.	Hyperplasia of prostate	...	...	...	...	3	—
30.	Pregnancy, childbirth, abortion	...	...	...	...	—	—
31.	Congenital malformations	...	...	...	...	3	4
32.	Other defined and ill-defined diseases	...	...	...	...	22	22
33.	Motor vehicle accidents	...	...	...	...	6	5
34.	All other accidents	...	...	...	...	6	5
35.	Suicide	...	...	...	...	4	3
36.	Homicide and operations of war	...	...	...	...	—	—
	All causes	...	...	...	...	364	310
						674	

WARD INCIDENCE OF DEATHS OCCURRING IN 1965

Stretford	...	...	91
Longford	...	...	96
Talbot North	...	...	98
Talbot South	...	...	68
Trafford	...	...	72
Cornbrook	...	...	83
Clifford	...	...	78
Park " A "	...	...	23
Park " B "	...	...	65
Total	...	...	<u>674</u>

BIRTHS

On the Registrar-General's figure of 1,171 registered births a crude birth rate for the year of 19·4 per 1,000 estimated resident population is obtained, which is adjusted by use of the comparability factor of 1·02 giving a birth rate of 19·8 per 1,000, comparable with the birth rate for England and Wales of 18·1 per 1,000.

DEATHS

The total number of deaths of Stretford residents recorded by the Registrar-General is 674 (see table on page 19).

421 deaths were registered in the Borough during the year, including 53 deaths of non-residents which were transferred to their appropriate registration areas : 306 Stretford residents died outside the district. The net number of deaths of Stretford residents (occurring within or outside the district) was, therefore, 674. Of this number, 416 (or 61 per cent. of the total deaths) occurred after the age of 65 years.

Age at death				Number
0—1	...	...	...	29
1—2	...	...	...	2
2—5	...	...	...	4
5—15	...	...	...	2
15—25	...	...	...	11
25—45	...	...	...	24
45—65	...	...	...	186
65—75	...	...	...	200
75 and over	...	...	...	216
Total	...	...	...	<u>674</u>

SECTION B.

GENERAL PROVISION OF HEALTH SERVICES

Full particulars of the Public Health Officers of the Authority are given on page 4 at the beginning of this Report.

Laboratory Facilities

Laboratory facilities for the examination of pathological and bacteriological specimens are provided by the Public Health Laboratory Service (directed by the Medical Research Council on behalf of the Ministry of Health), at Withington Hospital, Manchester. There is frequent and mutual collaboration between the department and the Laboratory. Dr. Tobin and his staff at the Laboratory have continued to give prompt advice which has been of practical value.

The Puerperal Pyrexia Regulations, 1951

Two cases of puerperal pyrexia were notified during 1965 as compared with two in 1964.

Maternal Mortality

No maternal deaths were recorded by the Registrar-General during 1965.

The improvement in the mortality figures since 1932 is shown in the following table overleaf :—

MATERNAL MORTALITY RATE

(Registrar-General's Figures)

Year	STRETFORD		England and Wales
	Maternal Deaths	Maternal Mortality Rate	Maternal Mortality Rate
1932	3	4.08	4.24
1933	5	7.07	4.24
1934	3	2.48	4.41
1935	3	3.74	3.93
1936	3	3.98	3.81
1937	3	3.76	3.11
1938	3	2.63	3.08
1939	2	2.86	2.82
1940	1	1.50	2.16
1941	—	—	2.23
1942	2	2.63	2.01
1943	5	5.17	2.29
1944	1	0.87	1.93
1945	3	2.84	1.79
1946	1	0.76	1.43
1947	3	2.16	1.17
1948	1	0.79	1.02
1949	—	—	0.98
1950	1	0.93	0.86
1951	1	0.98	0.79
1952	—	—	0.72
1953	—	—	0.76
1954	1	1.04	0.69
1955	—	—	0.64
1956	—	—	0.56
1957	1	0.94	0.47
1958	—	—	0.43
1959	2	1.82	0.38
1960	2	1.85	0.39
1961	—	—	0.33
1962	—	—	0.35
1963	—	—	0.28
1964	—	—	0.25
1965	—	—	0.25

Deaths from abortion have been included each year since 1943.

INFANT MORTALITY, 1965
CAUSES OF DEATH OF INFANTS UNDER ONE YEAR OF AGE

	Under 1 Mth.	1 Mth.	2 Mths.	3 Mths.	4 Mths.	5 Mths.	6 Mths.	7 Mths.	8 Mths.	9 Mths.	10 Mths.	11 Mths.	Total under 1 yr.
Prematurity	7	—	—	—	—	—	—	—	—	—	—	—	7
Atelectasis	7	—	—	—	—	—	—	—	—	—	—	—	7
Pneumonia	4	1	—	—	—	—	—	—	—	—	—	—	5
Asphyxia ...	—	—	—	1	—	—	—	—	—	—	—	—	1
Spina bifida	—	—	—	1	—	—	—	—	—	—	—	—	1
Anencephaly	1	—	—	—	—	—	—	—	—	—	—	—	1
Cardiac failure	1	—	—	—	—	—	—	—	—	—	—	—	1
Brain damage	1	—	—	—	—	—	—	—	—	1	—	—	2
Meconium Ileus ...	1	—	—	—	—	—	—	—	—	—	—	—	1
Acute Infectious Encephalitis	—	—	1	—	—	—	—	—	—	—	—	—	1
Venous sinus thrombosis	—	1	—	—	—	—	—	—	—	—	—	—	1
Hyaline membrane disease	1	—	—	—	—	—	—	—	—	—	—	—	1
TOTALS ...	23	2	1	2	—	—	—	—	—	1	—	—	29

INFANTILE MORTALITY

The infant mortality rate for 1965 was 24·8 per 1,000 live births as compared with 26 in the previous year. This is comparable with the rate for England and Wales of 19·0 per 1,000 live births. From the table on page 23 it will be observed that of the 29 deaths of children under one year of age 23 occurred within one month of birth.

NEO-NATAL DEATHS

Certified Causes

Prematurity :

Seven deaths were due to Prematurity

5 within 24 hours

1 at 1 day

1 at 2 days

Atelectasis :

5 within 24 hours

1 at 1 day

1 at 2 days

Pneumonia :

1 within 24 hours

1 at 2 days

1 at 3 days

1 at 3 weeks

Anencephaly :

1 within 24 hours

Cardiac failure :

1 at 3 days

Brain damage :

1 at 2 days

Meconium Ileus :

1 at 3 days

Hyaline Membrane disease :

1 at 1 day

INFANT MORTALITY RATE, 1932-1965

Year	STRETFORD		England and Wales
	Infantile Deaths	Infant Mortality Rate	Infant Mortality Rate
1932	44	59	65
1933	33	46	64
1934	32	41	59
1935	47	60	57
1936	28	37	59
1937	45	59	58
1938	39	53	53
1939	25	56	50
1940	48	75	55
1941	25	44	59
1942	54	74	49
1943	55	59	49
1944	54	48	46
1945	54	49	46
1946	55	45	43
1947	54	40	41
1948	57	46	34
1949	41	36	32
1950	33	31·0	29·8
1951	19	18·7	29·6
1952	19	19	27·6
1953	26	26	26·8
1954	16	17	25·5
1955	20	25	24·9
1956	39	38	23·8
1957	27	26	23·0
1958	39	37	22·5
1959	27	25	22·0
1960	38	36	21·7
1961	37	34	21·4
1962	32	27	21·4
1963	31	26	20·9
1964	33	26	20·0
1965	29	24·8	19·0

SECTION C.

SANITARY CIRCUMSTANCES OF THE AREA

Water, Drainage and Sewerage

There has been no change in the sanitary circumstances of the area relating to water supply, drainage and sewerage.

Rivers and Streams

The Local Authority for the prevention of pollution of rivers and streams is the Mersey Rivers Board. The rivers and streams in the Borough have been kept under observation by the District Public Health Inspectors.

The effluent from the Stretford Sewage Works discharges into the Kickety Brook and eventually into the River Mersey. Examination of the effluent is carried out systematically by the Mersey Rivers Board.

The sewage works, consist of preliminary, primary and biological treatment methods with separate sludge digestion and drying to deal with an ultimate flow of 14,400,000 gallons per day.

Closet Accommodation (end of 1965)

No. of Middens	...	...	...	...	...	None
,, Closets attached to these Middens	...	...	...	...	...	None
,, Pail Closets	...	...	...	...	...	None
,, Dry Ashpits (excluding Middens)	...	...	...	...	...	None
,, Fresh-water Closets	...	...	...	...	...	22,835
,, Movable Ashbins for refuse	...	...	...	...	...	20,603
,, Waste-water Closets	...	...	...	...	...	None

Public Cleansing

The arrangements are efficient and satisfactory, a strict weekly collection being maintained.

Sanitary Inspection of the Area

The following tabular statement is submitted by the Chief Public Health Inspector under Article 25(20) of The Public Health Officers' Regulations, 1959 :—

Inspections by Sanitary Staff during 1965 :—

Dwellings	...	...	...	...	...	22,511
Factories	...	...	...	...	...	264
Shops	...	...	...	...	...	88

No. of Notices served during the year—

Statutory—Public Health Acts	...	...	...	...	...	123
Informal	...	...	...	...	...	398

Results of Service of notices—

Statutory—Public Health Acts, Complied with	...	...	...	...	94
Informal—Complied with or in hand	...				348
Outstanding	...	...	...		50
Defects or nuisances discovered	...	...	...		1,065
Defects or nuisances abated	...	...	...		916

In addition to the informal notices referred to above, letters of intimation as to nuisances have been sent in 338 cases, making a total of 736 instances in which informal action has been taken to obtain a remedy.

Swimming Baths

The two public swimming baths in the Borough are provided with continuous filtration and chlorination plants.

There are no privately-owned swimming baths or pools in the Borough.

Schools

The sanitary condition of all primary and secondary schools is maintained in a satisfactory manner and the water supply to each school is from the Manchester Corporation. Each school is visited once every quarter by the Chief Public Health Inspector, who reports to the Committee for Education. Defects found are promptly remedied.

PREMISES AND OCCUPATIONS CONTROLLED BY BYE-LAWS OR REGULATIONS

Offensive Trades

There are a premises registered for the conduct of offensive trades (fat melting and gut scraping), the supervision of which is among the duties of the Public Health Inspectors. Full compliance with bye-law requirements has been maintained during the year, and the factory, is regarded as a model in regard to both layout and operation.

Houses Let in Lodgings

There are no “common lodging houses” in the Borough, but there is still a large number of houses let off in rooms (“houses let in lodgings,” “flats”) with inadequate amenities for each individual family.

SECTION D.

HOUSING

(a) Statistics

Number of new dwellings erected during the year

			Houses	Flats
(i) By the local authority	...	...	—	47
(ii) By other local authorities	...	...	—	—
(iii) By other bodies or persons	...	...	9	—

Dwellings completed since 1939

			Rebuilt after demolition due to enemy action
(i) By the local authority	...	*2,216	30
(ii) By other local authorities		—	—
(iii) By other bodies or persons		†421	99
Total	...	...	2,637
			129

* Includes 42 prefabricated houses, 1,359 flats. † Includes 66 flats.

(1) Inspection of Dwelling Houses during the year

(1) (a) Total number of dwelling-houses inspected formally or informally for housing defects (under Public Health or Housing Acts)	...	2,998
(b) Number of inspections, formal or informal, made for the purpose	... ..	4,456
(c) Number of dwelling-houses in (a) above found to be not in all respects reasonably fit for human habitation but capable of being rendered fit	... ..	546
(2) Total number of dwelling-houses existing at end of year which were unfit for human habitation and not capable at reasonable expense of being rendered fit and in respect of which		
(a) Demolition orders have been made (at anytime)	... ..	—
(b) Demolition clearance or closing orders have not yet been made	... ..	1,380

(2) Houses demolished :—	Houses Demo- lished	Displaced During Year	
		Persons	Families
In Clearance Areas—			
(1) Houses unfit for human habitation	269	339	75
(2) Houses included by reason of bad arrangements, etc.	—	—	—
(3) Houses on land acquired under Section 43(2), Housing Act, 1957	—	—	—
Not in Clearance Areas :			
(4) As a result of formal or informal procedure under Section 17(1), Housing Act, 1957.....	—	—	—
(5) Local authority owned houses certified unfit by the Medical Officer of Health	—	—	—
(3) Unfit Houses Closed :—	Number		
(1) Under Sections 16(4), 17(1), 35(1) Housing Act, 1957 and S.26 Housing Act, 1961.....	1	5	1
(2) Under Sections 17 (3) and 26, Housing Act, 1957.....	—	—	—
(3) Parts of buildings closed under Section 18, Housing Act, 1957	—	—	—

	Number	
(4) Unfit Houses Made Fit and Houses in which Defects were remedied :—		
(1) By owner after informal action by Local Authority	235	
(2) After formal notice under	140	
(a) Public Health Acts.....		
(b) Sections 9 and 16 Housing Act, 1957	—	
(3) Under Section 24 Housing Act, 1957	—	
(5) Unfit Houses in Temporary Use (Housing Act, 1957):—	Number of houses (1)	Number of separate dwellings contained in column (1) (2)
Position at end of year :		
(1) Retained for temporary accommodation—		
(a) Under Section 48.....	—	—
(b) Under Section 17(2) ...	—	—
(c) Under Section 46	—	—
(2) Licensed for temporary occupation under Section 34 or 53	—	—
(6) Purchase of Houses by Agreement :—	Number of houses (1)	Number of occupants of houses in Column (1) (2)
Houses in Clearance Areas other than those included in confirmed Clearance Orders or Compulsory Purchase Orders, purchased during the year	—	—

(7) Housing Act, 1949, and Housing (Financial Provisions) Act, 1958—

Improvement Grants, etc.

Action during year :	No. of dwelling houses or other buildings affected in schemes of —	
	Private bodies or individuals	Local Authority
(a) Submitted by private individuals to local authority	1	—
(b) Approved by local authority	1	—
(c) Submitted by local authority to Ministry	—	—
(d) Finally approved by Ministry	—	—
(e) Work completed	1	—
(f) Additional separate dwellings (included in (e) above)	—	—

(8) House Purchase and Housing Act, 1959 and Housing Act 1961 and 1964—Standard Grants :—

Action during year	No. of dwellings or other buildings affected
(i) Applications submitted to local authority for improvement to	
(a) full standard	55
(b) reduced standard	—
(ii) Total applications approved by local authority for improvement to	
(a) full standard	53
(b) reduced standard	—
(iii) Work completed	49
(iv) Particulars of any action relating to compulsory improvement of dwellings : None—recent survey shows only 25 fit dwellings require fixed bath and hot water.	

(b) Housing Conditions

(1) Sufficiency of Supply of Houses

- (a) Extent of shortage, stating minimum number and type of houses required :

1,023 applicants on register.

Houses required : 422 1-bedroom type.

405 2-bedroom type.

157 3-bedroom type.

27 4-bedroom type.

12 5-bedroom type.

- (b) Particulars of any housing scheme in hand or contemplated :

252 Flats in course of construction.

10 houses and 385 flats contemplated.

- (c) Any special difficulties in the way of providing suitable site for new houses :

Difficulty of limited Building Sites

(2) Fitness of Houses

- (a) Difficulties found in action under the Public Health Acts or under the Housing Acts :

None.

- (b) Number of houses which have not an adequate water supply :

None.

- (c) Number of houses which have no separate water closet or other adequate sanitary accommodation :

None.—Some families (in large houses intensively occupied) share closet accommodation.

ADMINISTRATION OF THE FACTORIES ACT, 1961
in connection with
FACTORIES, WORKSHOPS and WORKPLACES

**(1) INSPECTIONS FOR PURPOSES OF PROVISIONS
AS TO HEALTH (INCLUDING INSPECTIONS MADE
BY PUBLIC HEALTH INSPECTORS)**

Premises (1)	No. on Register (2)	Number of :		
		Inspec- tions (3)	Written Notices (4)	Occupiers prose- cuted (5)
(i) Factories in which Sec- tions 1, 2, 3, 4 and 6 are to be enforced by Local Authorities.....	30	9	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority.....	436	255	6	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out- workers' premises).....	6	1	—	—
TOTAL.....	472	265	6	—

HOME OFFICE FORM 572 (continued)

CASES IN WHICH DEFECTS WERE FOUND

Particulars (1)	Number of Cases in which defects were found				No. of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	Referred to H.M. Inspector (4)	Referred by H.M. Inspector (5)	
Want of cleanliness (S.1)	6	6	—	2	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7) :					
(a) Insufficient	1	1	—	—	—
(b) Unsuitable or defective	19	14	—	9	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork)	—	—	—	—	—
TOTALS	26	21	—	11	—

There is no outwork conducted in the district in unwholesome premises as defined by Section III of the Act.
36 Out-workers in August list (Wearing apparel).

SECTION E.

INSPECTION AND SUPERVISION OF FOOD

Milk Supply

There are now no dairy farms within the Borough.

The control of milk production is now the responsibility of the National Agricultural Advisory Service, a branch of the Ministry of Agriculture and Fisheries.

Registration of Retail Distributors

Applications for Registration received	Applications granted	Number of Notices to show Cause	Applications granted after Notice to show Cause	Total Applications granted	Removed from Register	On Register at December 31st, 1965
Dairymen (i.e., Retail Distri- butors of Milk with dairy premises) 1	1	—	—	1	—	4
Retail Distributors of Bottled Milk only 34	34	—	—	34	—	115
TOTAL 35	35	—	—	35	—	119

EXAMINATIONS OF MILK SAMPLES

The following is a summary of the milk samples submitted for Bacteriological and Phosphatase Examination during 1965

Type of Milk	Tubercle Bacilli		Methylene Blue Reduction		Phosphatase		Turbidity Test	
	+	—	S	Not S	S	Not S	+	—
Pasteurised... 	—	—	32	3	35	—	—	—
Sterilised 	—	—	—	—	—	—	—	—
Tuberculin Tested... ...	—	—	—	—	—	—	—	—
” ” (Pasteurised)	—	—	1	—	1	—	—	—
Ungraded 	—	—	—	—	—	—	—	—
TOTALS 	—	—	33	3	36	—	—	—

S denotes Satisfactory. Total Samples examined : 36.
Phosphatase : S = Not more than 2·3 Lovibond Blue Units.
Methylene Blue : S = Pasteurised Milk. Must not decolourise Methylene Blue in 30 minutes after storage at a temperature not exceeding 65°F. until between 9 a.m. and 10 a.m. on the day following collections.
Raw Milk. Must not decolourise Methylene Blue within 4½ hours if the sample is taken from 1st May to 31st October, or within 5½ hours if taken from 1st November to 30th April.

Milk (Special Designation) Regulations, 1960

The number of dealers' licences in respect of prepacked milk in force at the end of the year was 154.

Adulteration

The Administration of the Food and Drugs Act, 1955, Sections 9, 13 and 14 of the Lancashire County Council (Rivers Board and General Powers) Act, 1938, the Milk and Cream Regulations and the Condensed and Dried Milk Regulations is carried out by this Authority.

During the year 152 samples were submitted to the Salford City Analyst (public analyst for the Borough) for examination. They comprised 34 milk, 8 ice-cream and ice lollies, 14 drugs and 96 other foods.

Sixteen samples were adversely reported upon, five of them were minor irregularities in labelling, the manufacturers were informed and the labels altered. Nine samples were the result of complaints—lamb containing faecal pellets, pork pie with charred organic matter, luncheon meat—presence of fibres and solder, ice lollies contaminated by refrigeration cooling liquid, larvae in ground pepper sauce, rancid cooking butter, beetle in frozen peas, beans marked by insects prior to canning. Warning letters were sent to the manufacturers or persons concerned.

One drug sample was unsatisfactory due to excessive time for disintegration.

There were two prosecutions—one under Section 27 of the Milk and Dairies Regulations, 1959, in respect of rust in a milk bottle. The defendant was fined £25 and costs, and the other one under Section 2 of the Food and Drugs Act, 1955, in respect of the sale of mouldy crumpets, a fine of £20 was imposed.

SAMPLES EXAMINED

Report of the Borough Analyst

Samples	Number examined	Number adulterated or otherwise giving rise to irregularity	Per cent. adulteration
FOODS :			
Alcoholic Beverages (other than spirits) ...	8	—	—
Butter ...	1	1	100·0
Cereals and Cereal Products ...	3	—	—
Cheese ...	1	—	—
Chocolate Confectionery ...	2	—	—
Eggs ...	1	—	—
Fat (other than butter or margarine) ...	3	—	—
Fish Products (canned) ...	6	1	16·7
Flour Confectionery (other than bread) ...	5	—	—
Fruit—canned ...	2	—	—
Fruit—dried ...	8	1	12·5
Ice Cream—lollies, etc. ...	8	1	12·5
Meat Products—canned ...	2	2	100·0
Meat Products—pies ...	1	1	100·0
Meat Products—sausages ...	1	—	—
Meat Products—others ...	1	1	100·0
Milk (for compositional analysis) ...	31	—	—
Milk (others) ...	3	1	33·3
Nut Mix ...	1	—	—
Pectin ...	1	—	—
Pickles ...	2	—	—
Preserves ...	3	—	—
Puddings ...	5	—	—
Sauces ...	2	1	50·0
Soft Drinks ...	10	1	10·0
Soups ...	4	1	25·0
Spices, condiments, and herbs ...	8	—	—
Sugar—syrops, etc. ...	2	—	—
Vegetable Products—canned ...	5	1	20·0
Vegetable Products—dried ...	3	1	33·3
Vegetable Products—fresh ...	3	1	33·3
Vegetable Products—juice ...	2	—	—
DRUGS :			
Alka-Seltzer ...	1	—	—
Anadin ...	1	—	—
Ancolan ...	1	1	100·0
Andrew's Liver Salts ...	1	—	—
Cherry Cough Linctus ...	1	—	—
Compound Tablets Magnesium Trisilicate B.P.C. ...	1	—	—
Dulcolax ...	1	—	—
Epsom Salts ...	1	—	—
Febrilex B.P.C. ...	1	—	—
Febs ...	1	—	—
Hills Bronchial Balsam ...	1	—	—
Linctus of Codeine ...	1	—	—
Liquafruta ...	1	—	—
Soluble Aspirin ...	1	—	—
Total Food and Drugs ...	152	16	10·5

SECTION F.

PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES

The table on page 41 gives the incidence of notifiable infectious disease. There has been no serious epidemic, the notifications and the mortality approximating to the average for the past ten years.

The clinical type of scarlet fever continues to be mild.

No cases of diphtheria occurred for the fourteenth year.

Whilst the complete absence of diphtheria for the fourteenth year in succession is a very satisfying experience, it is feared that there is a danger of complacency leading to neglect of immunisation against this dread disease.

Antitoxin is available to all medical practitioners at Park Hospital, Davyhulme.

Immunisation against Diphtheria

This is now a function of the Health Committee. Material for immunisation is available for use by General Practitioners on application at the Town Hall, Stretford.

Immunisation is also carried out at each of the School Clinics and Child Welfare Centres in the Borough.

Whooping Cough and Measles

There were no deaths from measles or from whooping cough.

Puerperal Pyrexia

Two cases of puerperal pyrexia were notified.

Ophthalmia Neonatorum

No cases of ophthalmia neonatorum were notified.

Food Poisoning

There were no confirmed cases of food poisoning notified during the year. Two cases of salmonella infection were notified but were not considered to be food-borne.

Dysentery

There were 16 confirmed cases of sonne dysentery.

Acute Poliomyelitis

There were no confirmed oases of acute poliomyelitis during the year.

The following table gives the incidence of poliomyelitis in the Borough since 1945 :—

Year	Age incidence under 1 year				Over 1 year						Total
	0-2 mths.	3-5 mths.	6-8 mths.	9-11 mths.	1 yr.	2 yrs.	3 yrs.	4 yrs.	5 yrs.	6+ yrs.	
1945	—	—	—	—	—	—	—	—	—	—	—
1946	—	—	—	—	—	—	—	—	—	—	—
1947	—	—	1	1	—	2	1	—	—	4	9
1948	—	—	—	—	—	—	—	—	1	2	3
1949	—	—	1†	—	2	2	2	1	1	6	15
1950	—	2*	—	—	3	1	1	1	—	8	16
1951	—	—	—	—	—	—	1	—	—	1	2
1952	—	—	—	—	—	—	—	—	1	—	1
1953	—	—	—	—	—	—	—	—	2	1	3
1954	—	—	—	—	—	—	—	—	—	—	—
1955	—	—	—	—	—	—	—	—	—	—	—
1956	—	—	—	—	—	—	—	1	3	10	14
1957	—	—	—	—	—	—	—	—	—	—	—
1958	—	1	—	—	2	1	2	—	1	2	9
1959	—	—	—	—	—	—	—	—	—	—	—
1960	—	—	—	—	—	—	—	—	—	—	—
1961	—	—	—	—	—	—	—	—	—	—	—
1962	—	—	—	—	—	—	—	—	—	—	—
1963	—	—	—	—	—	—	—	—	—	—	—
1964	—	—	—	—	—	—	—	—	—	—	—
1965	—	—	—	—	—	—	—	—	—	—	—
TOTAL	—	3	2	1	7	6	7	3	9	34	72

* Patients had not received any immunising inoculations during the 12 months preceding the date of onset of symptoms — fatal.
† Patients had not received any immunising inoculations during the 12 months preceding the date of onset of symptoms — some paralysis.

There has been no evidence to suggest any casual connection between immunisation against diphtheria and onset of poliomyelitis.

INCIDENCE OF NOTIFIABLE DISEASES DURING THE YEAR 1965

[illegible]

CASES OF NOTIFIABLE AND NON-NOTIFIABLE DISEASES REMOVED TO HOSPITAL

Sent into Hospital as	HOSPITAL :					
	Ladywell Hospital	Monsall Hospital	Florence Nightingale Hospital	Royal Manchester Childrens Hospital	Westhulme Hospital	Hope Hospital
Upper Res. Infection	1	1	—	—	—	—
Scarlet Fever	1	1	—	—	—	—
Tonsillitis	1	—	—	—	—	—
Acute Poliomyelitis	—	2	—	—	—	—
Dysentery	1	1	1	—	—	—
Glandular Fever	—	1	—	—	—	—
Measles	—	6	—	1	—	—
Whooping Cough	2	2	—	1	1	—
Puerperal Pyrexia	—	—	—	—	—	1
Gastro Enteritis	22	16	—	—	—	—
Meningitis	—	3	—	—	—	—
Diarrhoea and Vomiting	—	1	—	—	—	—
Para Typhoid	3	2	—	—	—	—
Broncho-Pneumonia	2	—	—	—	—	—
Infective Hepatitis	1	3	—	—	—	—
Food Poisoning	1	1	—	—	—	—
Malaria	—	1	—	—	—	—
?Virus	1	—	—	—	—	—
P.U.O.	—	2	—	—	—	—
TOTALS	36	43	1	2	1	1
						84

WARD DISTRIBUTION OF NOTIFIED CASES OF INFECTIOUS DISEASE

Notified Disease	Ward distribution of Cases notified								Number of Cases removed to Hospital from each Ward										
	WARDS								WARDS										
	Stretford	Longford	Talbot North	Talbot South	Trafford	Cornbrook	Clifford	Park "A"	Park "B"	Stretford	Longford	Talbot North	Talbot South	Trafford	Cornbrook	Clifford	Park "A";	Park "B"	Total
Diphtheria (inc. Membranous Croup)	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	11	13	8	6	3	2	4	1	3	—	—	1	—	—	—	—	1	—	—
Scarlet Fever	—	—	—	—	3	—	11	2	—	—	—	—	—	—	—	1	2	—	2
Dysentery	—	—	—	—	4	—	3	5	—	—	—	—	—	—	—	—	5	—	3
Paratyphoid Fever	6	—	3	1	4	2	3	3	—	—	—	1	2	—	1	3	3	—	7
Whooping Cough	74	83	60	41	43	44	32	24	51	—	—	1	—	—	1	—	—	—	5
Measles ...	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1
Puerperal Pyrexia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Ophthalmia Neonatorum	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Meningococcal Infection	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Poliomyelitis	—	—	2	3	1	1	3	1	1	—	—	—	—	—	—	—	—	—	—
Tuberculosis : Pulmonary	1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—
Other forms	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Encephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia	1	1	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—
Food Poisoning	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Malaria (Contracted Abroad)	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1	1
TOTALS	93	98	74	51	55	50	54	36	57	—	—	4	2	—	2	4	11	1	24

NOTIFICATIONS OF INFECTIOUS DISEASES, 1956-1965

	1965	1964	1963	1962	1961	1960	1959	1958	1957	1956	10 years mean
Scarlet Fever ...	51	58	25	12	67	61	68	56	89	23	51.0
Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—
Paratyphoid Fever ...	5	—	—	—	8	—	2	—	2	1	1.8
Pneumonia ...	4	9	6	8	8	14	14	18	24	23	12.8
Meningococcal Infection ...	—	—	—	1	1	1	2	—	2	2	0.9
Acute Encephalitis ...	—	—	—	—	—	—	—	—	1	—	0.1
Dysentery ...	16	77	179	147	17	68	31	55	427	147	116.4
Erysipelas ...	1	4	1	—	3	3	6	9	2	8	3.7
Acute Poliomyelitis ...	—	—	—	—	—	—	—	9	—	14	2.3
Measles ...	452	355	681	215	755	257	659	197	882	208	466.1
Whooping Cough ...	22	41	47	1	20	135	23	16	86	101	49.2

DEATHS

	1965	1964	1963	1962	1961	1960	1959	1958	1957	1956	10 years mean
Scarlet Fever ...	—	—	—	—	—	—	—	—	—	—	—
Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—
Enteric Fever ...	—	—	—	—	1	—	—	—	—	—	0.1
Pneumonia ...	24	31	33	35	37	32	46	38	26	11	31.3
Meningococcal Infection ...	—	—	—	—	—	—	—	—	—	1	0.1
Acute Encephalitis ...	—	—	—	—	—	—	—	—	—	—	—
Dysentery ...	—	—	—	—	—	—	—	—	—	—	—
Erysipelas ...	—	—	—	—	—	—	—	—	—	—	—
Acute Poliomyelitis ...	—	—	—	—	—	—	—	—	—	—	—
Measles ...	—	1	2	—	—	—	1	—	1	—	0.5
Whooping Cough ...	—	—	1	—	—	—	—	—	—	—	0.1

INFECTIOUS DISEASES

Infectious Diseases (other than Tuberculosis) notified each month during 1965

Month	DIPHTHERIA (inc. Membranous Croup)	ERYSIPELAS	SCARLET FEVER	ACUTE POLIOMYELITIS	PUERPERAL PYREXIA	OPHTHALMIA NEONATORUM	PNEUMONIA	FOOD POISONING	PARATYPHOID FEVER	DYSENTERY	MENINGOCOCCAL INFECTION	MALARIA	AC. ENCEPHALITIS	MEASLES	WHOOPING COUGH	TOTAL
January ...	—	—	7	—	—	—	—	—	—	—	—	—	—	68	3	78
February ...	—	—	15	—	—	—	2	—	—	1	—	—	—	92	3	113
March ...	—	—	7	—	—	—	1	—	—	—	—	—	—	93	—	101
April ...	—	1	5	—	—	—	—	—	—	2	—	—	—	61	1	70
May ...	—	—	5	—	1	—	—	—	—	4	—	—	—	34	1	45
June ...	—	—	—	—	—	—	—	—	—	—	—	—	—	25	1	26
July ...	—	—	2	—	—	—	—	—	—	1	—	—	—	16	—	19
August ...	—	—	—	—	—	—	—	—	5	2	—	—	—	1	3	11
September ...	—	—	2	—	—	—	—	—	—	—	—	1	—	1	5	9
October ...	—	—	1	—	—	—	—	—	—	—	—	—	—	27	1	29
November ...	—	—	2	—	1	—	—	—	—	1	—	—	—	30	—	34
December ...	—	—	5	—	—	—	1	—	—	5	—	—	—	4	4	19
TOTAL ...	—	1	51	—	2	—	4	—	5	16	—	1	—	452	22	554

Notifications were amended in Hospital in three cases viz :—

In one case notified as Acute Poliomyelitis (Paralytic) diagnosis was amended to :—

Cellulitis of leg 1

In one case notified as Acute Poliomyelitis (Non-Paralytic) diagnosis was amended to :—

Acute Rheumatism 1

In one case notified as Whooping Cough diagnosis was amended to :—

Laryngo Tracheo Bronchitis 1

Six cases notified as Dysentery and two cases notified as Food Poisoning were not confirmed bacteriologically.

BACTERIOLOGICAL EXAMINATION IN DIAGNOSIS OF INFECTIOUS DISEASE

	Patients		Contacts	
	Positive	Negative	Positive	Negative
Swabs for Diphtheria.....	—	4	—	—
Faeces for Dysentery	55	170	—	99
Faeces for Food Poisoning	2	14	—	3
Faeces for Typhoid	—	9	—	22
Faeces for Paratyphoid	5	—	—	—
Sputum for Tuberculosis	—	—	—	—
Blood for Typhoid	—	—	—	4
Urine for Typhoid	—	—	—	4

DISINFECTION

Disinfection of premises is carried out by formaldehyde spray and formalin vapour generators. Infected bedding and other articles suitable for disinfection by steam are dealt with at Ladywell Hospital, Salford. Other articles are disinfected in situ by formalin.

PUBLIC HEALTH (SMALLPOX PREVENTION)

REGULATIONS, 1917

No vaccinations have been performed by the Medical Officer of Health under these Regulations during the year.

Facilities for vaccination are available at all Infant Welfare Centres in the area and by all general practitioners.

CANCER

The death rate from cancer was 2·12 per 1,000 population of the Borough.

Deaths recorded from cancer were 126 and these are shown by age distribution and site of disease on page 48.

At the age groups shown below the deaths from cancer are compared with total deaths :—

	At ages (years)					
	0—35	35—45	45—55	55—65	65 and over	Total
Total deaths from cancer	2	6	11	38	69	126
Total deaths from all causes	50	22	39	147	416	674
Percentage of cancer deaths to total deaths ...	4·00	27·27	28·20	25·85	16·58	18·69

DEATHS FROM CANCER, 1965

Site of Disease and Age at Death

CANCER (Site)	At ages (years)					
	At all ages	0 to 35	35 to 45	45 to 55	55 to 65	65 and over
Brain	1	—	—	—	—	1
Nose	1	—	—	—	—	1
Upper Lip	1	—	—	—	—	1
Mouth	1	—	1	—	—	—
Jaw bone	1	—	—	—	—	1
Thyroid	1	—	—	—	1	—
Oesophagus	1	—	—	—	—	1
Pharynx	1	—	—	—	1	—
Lung	16	1	1	1	9	4
Bronchus	28	—	—	4	11	13
Breast	8	—	1	2	1	4
Stomach	14	—	—	—	2	12
Liver	3	—	—	1	—	2
Liver and Pancreas	1	—	—	—	—	1
Liver and Uterus	1	—	—	—	1	—
Gall bladder	3	—	—	—	1	2
Colon	6	—	—	—	3	3
Pancreas	4	—	—	1	—	3
Kidney	2	—	—	—	—	2
Bladder	5	—	—	—	2	3
Bowel	1	—	—	—	1	—
Rectum	6	—	—	1	3	2
Ovary	4	—	2	—	—	2
Cervix	3	—	—	1	—	2
Peritoneum	1	—	1	—	—	—
Prostate	5	—	—	—	—	5
Lymph Gland	2	1	—	—	1	—
Multiple Myelomatosis...	2	—	—	—	1	1
Carcinomatosis	3	—	—	—	—	3
TOTALS	126	2	6	11	38	69

TUBERCULOSIS

Thirteen cases of pulmonary tuberculosis and one case of non-pulmonary tuberculosis were notified during the year. There were two deaths from pulmonary tuberculosis, and one death from a non-pulmonary form of the disease.

The number of cases of tuberculosis on the register at 31st December, 1965 is shown in the following table :—

Pulmonary			Non-Pulmonary			Total Pulmonary and Non-Pulmonary		
Male	Female	Total	Male	Female	Total	Male	Female	Total
125	95	220	11	9	20	136	104	240

Tuberculosis. New Cases and Mortality during 1965

Age Periods	NEW CASES				DEATHS			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
Years :								
0—.....	—	—	—	—	—	—	—	—
1—.....	—	—	—	—	—	—	—	—
2—.....	—	—	1	—	—	—	—	—
5—.....	—	—	—	—	—	—	—	—
10—.....	—	—	—	—	—	—	—	—
15—.....	—	—	—	—	—	—	—	—
20—.....	—	—	—	—	—	—	—	—
25—.....	2	—	—	—	—	—	—	—
35—.....	1	1	—	—	—	—	—	—
45—.....	3	1	—	—	—	—	—	—
55—.....	3	1	—	—	—	—	—	—
65—.....	—	—	—	—	1	—	1	—
75 and over	1	—	—	—	—	1	—	—
TOTALS	10	3	1	—	1	1	1	—
	13		1		2		1	

Tuberculosis. New cases and Mortality, 1956-1965

Year	NEW CASES				DEATHS			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
1956	20	14	1	3	11	—	5	1
1957	18	13	2	—	4	3	—	—
1958	19	16	3	2	7	2	—	—
1959	18	13	—	1	13	1	—	1
1960	22	9	—	1	2	1	—	—
1961	12	5	3	4	5	1	—	—
1962	12	7	4	2	2	3	—	—
1963	11	4	1	1	4	3	—	1
1964	15	7	—	2	2	—	—	—
1965	10	3	1	—	1	1	1	—

The Chest Clinic is situated at Stretford Memorial Hospital where all facilities for diagnosis and ambulatory treatment are available.

Non-Notified Tuberculosis

There was one death from Tuberculosis which had not been previously notified :—

A woman aged 89 years : certified cause of death :—

I(a) Hypostatic Pneumonia

II Pulmonary Tuberculosis

No action has been required under the Public Health Act (Prevention of Tuberculosis) Regulations, 1925, relating to persons suffering from pulmonary tuberculosis employed in the milk trade, or under Section 62 of the Public Health Act, 1925, or Section 172 of the Public Health Act, 1936, for the compulsory removal to hospital of persons suffering from tuberculosis.

NATIONAL ASSISTANCE ACTS, 1948 and 1951

Removal of Persons in need of care and attention

There were two occasions during the year under review to make application to a Justice of the Peace for the removal of an aged and infirm person, one suffering from grave chronic disease and the other living in insanitary conditions. Both were unable to devote to themselves and were not receiving from other persons proper care and attention.

SECTION G

PERSONAL HEALTH AND WELFARE SERVICES DELEGATED TO THE BOROUGH

Under the Local Government Act, 1958

In accordance with the delegation scheme formulated under the Local Government Act, 1958, certain Health and Welfare Services which had previously been administered by the Lancashire County Council through their Divisional Health Committee No. 16 became the responsibility of the Borough as from 1st October, 1960.

The services concerned are as follows :—

National Health Service Act, 1946

- Section 21—Health Centres.
- Section 22—Care of Mothers and Young Children.
- Section 23—Midwifery.
- Section 24—Health Visiting.
- Section 25—Home Nursing.
- Section 26—Vaccination and Immunisation.
- Section 28—Prevention of Illness—Care and After Care
- Section 29—Home Help Service.

Mental Health Act, 1959

Mental Health Services
(with the exception of the provision of
residential accommodation)

National Assistance Act, 1948

Sections 29 and 30—Welfare Services for Handicapped
Persons.

Nurseries and Child-Minders Regulation Act, 1948

Registration of Nurseries and Child-Minders.

A brief outline of the services provided under these functions and a record of the work carried out during the year ended 31st December, 1965, is contained in the following pages.

Notified Births (i.e., occurring) in the Borough, together with inward and outward transfers, during 1965

	IN HOSPITALS, MATERNITY HOMES, ETC.								IN THE HOME								TOTAL							
	Live Births				Still Births				Live Births				Still Births				Live Births				Still Births			
	*Pre-mature		Mature		Total				*Pre-mature		Mature		Total				*Pre-mature		Mature		Total			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
TOTALS occurring in the Borough 1965	14	19	292	302	306	321	2	2	3	5	104	106	107	111	1	1	17	24	396	408	413	432	3	3
Total outward transfers	10	13	186	199	196	212	1	—	—	—	1	1	1	1	—	1	10	13	187	200	197	213	1	1
Total inward transfers	38	41	353	326	391	367	13	9	—	—	—	—	—	—	—	—	38	41	353	326	391	367	13	9
Final number belonging to the Borough	42	47	459	429	501	476	14	11	3	5	103	105	106	110	1	—	45	52	562	534	607	586	15	11

* A birth is regarded as "Premature" if the birth weight is $5\frac{1}{2}$ lbs. or less.

Births are NOTIFIED within 48 hours of birth. Registration may be made at any time up to 42 days after birth.

NATIONAL HEALTH SERVICE ACT, 1946

SECTION 21 — HEALTH CENTRES

There are no Health Centres in the Borough and no proposals for the future.

SECTION 22 — CARE OF MOTHERS AND YOUNG CHILDREN

Ante-Natal and Post-Natal Care

Ante-Natal sessions are held at the four clinics within the Borough and are attended by the Medical Officer and Midwife. Routine blood and urine tests are carried out, and free dental and chiropody treatment is available for all expectant mothers.

Relaxation exercise classes are held weekly by the physiotherapist, and mothercraft is taught by the Health Visitors and Midwives.

Work done at Ante-Natal Clinics during 1965

Combined Ante-Natal and Post-Natal Clinics (including midwives' sessions)	No. of sessions	No. of individual women attending	No. of attendances
Old Trafford	69	104	562
Trafford Park	17	20	72
Mitford Street	29	40	130
Lostock	18	22	69
TOTALS	133	186	833

Work done at Relaxation Clinics during 1965

Name of Clinic	No. of sessions	No. of individual women attending	No. of attendances
Old Trafford ...	47	154	938

Post-Natal Care

There are no specific post-natal clinics in the Borough but post-natal examinations are carried out in conjunction with the ante-natal clinics.

Post-Natal Examinations of Women Confined during 1965

	Confined in hospital	Confined in private nursing homes	Confined at home	
			Doctor engaged	No doctor engaged
(a) Number of mothers normally resident in the Borough who were confined during the year ...	969	16	209	1
(b) Number of those in (a) above known to have had a post-natal pelvic examination by a doctor between the fifth and twelfth weeks after confinement	717	13	169	1
Proportion (per cent.) of (b) to (a)	74%	81%	81%	100%

Child Welfare Centres

There are four child welfare clinics serving the Borough to which mothers are encouraged to bring all children who have not reached the age of five years. A medical officer is available for consultation at all clinics and Health Visitors are present to interview and advise mothers on all aspects of physical and mental health.

Immunisation against diphtheria, whooping cough and tetanus, smallpox vaccination and poliomyelitis vaccination is available free.

Certain proprietary foods are on sale at all centres on the recommendation of the Medical Officer, and the distribution and sale of Ministry of Health Welfare Foods is undertaken. These welfare foods comprise National Dried Milk, Orange Juice, Cod Liver Oil and Vitamin Tablets.

Summary of attendances at CHILD WELFARE CENTRES during 1965

Child Welfare Centre	No. of Sessions	No. of individual children attending who were born in			No. of attendances of children at ages			Average attendances by all children (per session)
		1965	1964	1960-1963	0-1	1-2	2-4	
Old Trafford	100	328	357	284	3,461	621	410	44.9
Mitford Street	100	292	296	322	4,207	823	256	52.8
Trafford Park	51	36	47	67	1,018	174	55	24.4
Lostock	52	97	108	138	1,473	640	482	49.9
TOTALS	303	753	808	811	10,159	2,258	1,203	44.9

Welfare Foods distributed during 1965

The following issues of National Welfare Foods were made from all Centres in the Borough during the year ended 31st December, 1965 :—

National Dried Milk	...	...	9,129 tins
Cod Liver Oil	...	...	1,326 bottles
Vitamin A and D tablets	...	...	1,230 packets
Orange Juice	...	...	12,777 bottles

Dental Care

Dental treatment, including the supply and repair of dentures, is provided free to expectant and nursing mothers and children under five years of age. Clinics are held at Trafford Public Hall and Mitford Street.

Work of the Dental Officers during 1965

	Children under 5 years of age and NOT attending school	Expec- tant Mothers	Nursing Mothers	Total
Number inspected	169	12	41	222
Number treated	183	39	52	244
Number treated who were rendered dentally fit ...	51	5	18	74
Number of extractions ...	308	8	97	413
Number of administrations of anaesthetics — Local ...	4	6	29	39
General ...	123	1	14	138
Number of fillings	292	23	84	399
Number of crowns	—	—	1	1
Number of scalings, or scal- ings and gum treatment ...	4	1	15	20
Number of silver nitrate treatments	—	1	—	1
Number of radiographs ...	—	—	7	7
Number of dentures provided				
Complete	—	—	9	9
Partial	—	1	1	2
Repaired	—	—	—	—

Ascertainment of Deafness

In view of the importance of early diagnosis of deafness, all Health Visitors have received special training in its ascertainment and screening tests are conducted at clinic sessions. All cases requiring further investigation are referred to the Department of Education for the Deaf at Manchester University.

Screening Tests conducted during 1965

	First Tests					Second Tests					Third Tests				
	Age in Years					Age in Years					Age in Years				
	0-	1-	2-	3-	4-	0-	1-	2-	3-	4-	0-	1-	2-	3-	4-
Vulnerable ...	55	7	2	-	-	7	4	-	-	-	-	-	-	-	-
Others ...	160	29	-	-	2	2	1	-	-	1	-	-	-	-	-

Phenylketonuria

Routine testing of urine for Phenylketonuria is carried out at the infant welfare centres.

Screening Tests for Phenylketonuria carried out during 1965

			First Tests	Second Tests
Number of tests performed	...	...	994	807
Number found negative	...	...	994	807
Number found positive	...	...	Nil	Nil

Premature Infants

Premature infants are those who weigh 5½ lbs. or less at birth. Special attention is given by Health Visitors to all premature babies, working in close liaison with the Midwife if the confinement is at home. Special equipment is available on loan to assist in the proper care of the premature infant and specially heated cots are used for the transportation of premature babies to hospital.

Premature births notified during 1965 after adjustments for inward and outward transfers.

	Born at Home	Born in Hospital or Maternity Home	Total
Total Premature Births ...	8	89	97
Died within 24 hours ...	1	8	9
Percentage of Infants surviving 24 hours ...	88%	91%	91%
Survived 28 days ...	7	72	79
Percentage of Infants surviving 28 days ...	88%	81%	81%

Incidence of Congenital Abnormalities

Since the 1st January, 1964, a scheme has been in operation for the notification to the Health Department by midwives and hospital authorities of any congenital malformations observed in newly born infants.

The following table indicates the number and rate per 1,000 births of congenital malformations notified during the year :—

Administrative Area	Total Births (Live and Still)	No. of infants with malformations	No. of malformations	Rate per 1,000 total births	
				Infants with malformations	Malformations
Stretford	1,219	18	21	14.8	17.2
Lancashire County Total	42,857	703	847	16.4	19.8

The 21 malformations referred to in the above table are listed as follows :—

(a) Central Nervous System		Dislocation of hip	1
Anencephalus	5	Talipes	1
Hydrocephalus	1	Other defects of hand	1
Spina bifida	2	Other defects of pelvic girdle and lower limbs	1
(b) Uro-genital system		(d) Other Systems	
Hypospadias, epispadias	1	Bronchial cleft, cyst or fistula ; preauricular sinus	1
Other defects of male genitalia	1	Other defects of face and neck	1
(c) Limbs			
Defects of lower limbs	1		
Reduction deformities	1		
Polydactyly	3		

Day Nurseries

Four day nurseries are provided in the Borough, and priority is given to the admission of children regarded as social cases, usually when the persons solely responsible for the care of young children must of necessity go out to earn a living. A charge is made for this service according to means.

Number 1 Day Nursery, Beresford Road and Number 5 Day Nursery, Northumberland Road, are designated as Training Nurseries, whereby they participate in the N.N.E.B. Training Scheme. Under this scheme, four students were in training at the end of the year.

DAY NURSERIES
Summary of attendances during 1965

Nursery	Number of Places Approved		No. of Days Open	Mondays to Fridays only			No. of Children at end of year			
				Proportion of attendances to Day Places (All ages)	On Registers		On Waiting Lists			
	0—1	2—4			Total attendances at ages		0—1	2—4	0—1	2—4
Beresford Road ...	10	24	247	1,476	5,027	77·4%	6	27	12	10
Victoria Park ...	10	24	247	2,177	4,400	78·3%	11	23	24	15
Seymour Grove ...	12	26	247	1,274	5,228	69·3%	8	24	26	32
Northumberland Rd.	18	22	249	2,210	4,776	70·2%	10	23	27	7
TOTAL ...	50	96	990	7,137	19,431	73·8%	35	97	89	64

DAY NURSERIES Social Cases attending the Day Nurseries

DAY NURSERY	A.1	A.2	A.3	A.4	A.5	A.6	A.7	Social Cases— Total No. of children attending	Total No. of children attending during year	% Social Cases
Beresford Road ...	2	3	8	4	—	—	10	27	46	58.7
Victoria Park ...	10	2	12	5	—	2	6	37	53	69.8
Seymour Grove ...	3	2	11	5	1	—	10	32	42	76.2
Northumberland Road ...	5	2	4	16	1	2	16	46	58	79.3
	TOTAL ...							142	199	71.4%

CODE :—A.1. Special Cases due to illness, confinement, etc. of mothers.
A.2. Widows.
A.3. Women separated, divorced or deserted.
A.4. Unmarried Mothers.

CODE :— A.5. Women whose husbands are invalids or work part-time.
A.6. Widowers or fathers separated, divorced or deserted.
A.7. Any other special reasons, e.g., problem families, unsatisfactory living conditions, children requiring special care, etc.

Care of Unmarried Mothers and their Children

Officially the unmarried mother is entitled to similar services and benefits under the National Health Service Act as the married mother, but these services are not always adequate to meet her needs. She often requires special advice and help and this work is carried out by the Health Visiting staff.

Advice quite often required by the unmarried mother includes such subjects as affiliation orders, adoption procedure, hostel accommodation, before, during and after confinement, placements of child with foster parents, or placement in a day nursery.

No Mother and Baby Homes are administered by the Local Health Authority but the admission of unmarried mothers to Hostels is arranged through moral welfare societies, payment being made on a case basis.

Under these arrangements twenty-four unmarried mothers were admitted to Mother and Baby Homes during the year ended 31st December, 1965 as follows :—

Mother and Baby Homes	No. of Cases	
	Ante-Natal	Post-Natal
St. Agnes House, Withington	3	1
St. Ann's, Heywood ...	3	—
St. Teresa's, Salford ...	11	—
The Grange, Wilpshire ...	3	—
Sacred Heart, Kendal ...	1	—
St. Raphael's Convent, Bristol	1	—
Home of the Good Samaritan	—	1
	—	—
	22	2
	==	==

Family Planning Clinics

Women who for health reasons require advice on birth control may be referred to a family planning clinic, payment being made to the voluntary association administering such clinics on a case basis.

SECTION 23 — MIDWIFERY

The domiciliary midwifery scheme provides for the employment of whole-time midwives who attend the confinements of patients in their own homes. Maternity outfits are supplied free to such patients.

The staff establishment is for seven domiciliary midwives. An appointment was made in July 1965, and there were seven midwives employed by the authority at the end of the year.

In addition to the Midwives employed by the Local Health Authority, there were 13 Midwives on the staff at Stretford Memorial Hospital at 31st December, 1965.

Cases attended by all Midwives in the Borough during the year 1965

	Confinements	Cases in which analgesics were given
(a) Local Health Authority Midwives	219	186
(b) Hospital Services	631	582
Total	850	768

Proportion of births in the Borough attended by Local Health Authority Midwives during the year 1965 :—

(a) Total number of live and still births occurring in the Borough	851
(b) Total number of live and still births belonging to the Borough	1,219
(c) Number of (a) which were domiciliary	220
(d) Number of (c) which were attended by L.H.A. Midwives	220
(e) Percentage of (d) to (a)	26%
(f) Percentage of (d) to (b)	18%
(g) Percentage of (d) to (c)	100%

Summary of Work by Local Health Authority Midwives during 1965
(a) Confinements and Miscarriages

Confinements (1)					Miscarriages (2)				
Dr. NOT booked		Dr. booked		Total	Dr. NOT booked		Dr. booked		Total
Dr. present at Delivery	Dr. NOT present at Delivery	Dr. present at Delivery	Dr. NOT present at Delivery		Dr. present at Delivery	Dr. NOT present at Delivery	Dr. present at Delivery	Dr. NOT present at Delivery	
1	3	13	202	219	—	1	—	2	3

(b) Livebirths, stillbirths, hospital discharges and deaths

Live-births			Stillbirths			Cases attended where patient had been confined in hospital and discharged before the 10th day	Deaths	
Dr. present at Delivery	Dr. NOT present at Delivery	Total	Dr. present at Delivery	Dr. NOT present at Delivery	Total		Mother	Child (under 1 month)
13	205	218	1	1	2	474	—	4

(c) Visits

To confinements and miscarriages shown in section (a) above (1)	To hospital discharges shown in section (b)(3) above (2)	Total (3)	Total number of visits included in column (1) which were made between the hours of 9 p.m. and 8 a.m. (i.e., night visits) (4)
6,507	1,856	8,363	321

(d) Confinements at which analgesics were administered

	Gas/Air				Pethidene		Trilene	Total
	Alone	With Pethidene	With Trilene	With Pethidene and Trilene	Alone	With Trilene	Alone	
Midwives								
Dr. present at delivery ...	—	—	—	—	1	3	6	10
Dr. NOT present at delivery ...	2	—	—	14	6	77	77	176
TOTAL ...	2	—	—	14	7	80	83	186

SECTION 24 — HEALTH VISITING

The Council are responsible for providing a service of health visitors whose duties are broadly speaking that of health teacher and family adviser.

Health Visitors have nursing and midwifery qualifications in addition to possessing the health visitor's certificate and are specially equipped to deal with social problems. They frequently act as the link between the family and the various statutory and voluntary social services available to them.

Whilst health visitors are concerned with all classes of the community needing health education or advice on social problems particular attention is given to the care of infants and young children, the aged, the handicapped, and problem families. Health Visitors also attend regularly at ante-natal clinics, relaxation classes, child welfare centres and school health inspections. Other duties carried out include assistance with vaccination and immunisation programmes, the carrying out of special surveys, screening tests in connection with the ascertainment of defective hearing in young children, and enquiries into applications for admission to convalescent homes. This list is not intended to be comprehensive but does indicate the varied scope of the work of health visitors.

The staff establishment provides for 15 Health Visitors, but at the end of the year the number of Health Visitors employed was only ten owing to difficulties in recruitment of staff. Two School/Clinic Nurses were employed to relieve Health Visitors by assisting in Clinics and Schools.

Number of Visits by Health Visitors during 1965

Expectant Mothers :

Total Visits	194
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Children under five years of age :

Total Visits	13,401
--------------	-----	-----	-----	--------

Adults (excluding expectant mothers) :

Total Visits	1,386
--------------	-----	-----	-----	-------

Other Cases :

Total visits	740
--------------	-----	-----	-----	-----

Ineffective visits	2,595
--------------------	-----	-----	-----	-------

TOTAL VISITS	<u>18,316</u>
--------------	-----	-----	-----	---------------

SECTION 25 — HOME NURSING

The Council are responsible for securing the attendance of nurses on persons who require nursing care in their own homes. The services of District Nurses are obtained through the recommendation of general practitioners, with whom they work in close co-operation.

All the District Nurses employed are State Registered Nurses, most of whom have undertaken “district training” for the examination of the Queen’s Institute of District Nursing.

The staff establishment is nine District Nurses, and eight nurses were employed at the end of the year. In addition, three assistant nurses were employed, mainly in nursing the aged and chronic sick under the supervision of the State Registered Nurses.

(a) General Nursing Cases Attended

(i) No. on registers at end of 1964	...	...	300
(ii) New cases attended during 1965	...	...	778
			<hr/>
Total	...	...	1,078
			<hr/>
(iii) LESS cases completed (i.e., attendances ceased during 1965)	...	...	740
			<hr/>
(iv) No. on registers at end of 1965	...	...	338
			<hr/> <hr/>

(b) Visits paid during 1965

	Day	Night	Total
To general cases on registers	... 32,363	414	32,777
Casual advisory visits	... 1,794	3	1,797
Other advisory interviews	... 885	—	885
			<hr/>
Totals	... 35,042	417	35,459
			<hr/> <hr/>

HOME NURSING — ANALYSIS OF COMPLETED CASES
Table 1 — By Duration of Treatments and Frequency of Visits —
Completed cases for year ended 31st December, 1965

Disease or Ailment	Total No. of Cases	Duration of Treatments				
		Length of treatment (days)	Average duration of treatment (weeks)	Total Visits		Average No. of visits (day and night)
				Day	Night	
Tuberculosis of Respiratory System	1	186	26.6	186	—	186.0
Other infective and parasitic diseases	8	123	2.2	97	—	12.1
Cancer	46	1,245	3.9	905	33	20.4
Diabetes	14	769	7.8	648	—	46.3
Anaemias and other blood diseases	79	30,869	55.8	4,744	—	60.1
Mental, psychoneurotic disorders	2	747	53.4	119	—	59.5
Cerebral haemorrhage, cerebral embolism and thrombosis	36	3,571	14.2	1,502	2	41.8
Other diseases of central nervous system	46	6,928	21.5	2,817	15	61.6
Diseases of eye, ear and mastoid process	3	92	4.4	92	—	30.7
Diseases of heart and circulatory system	41	4,031	14.0	1,132	2	27.7
Influenza	2	630	45.0	227	—	113.5
Pneumonia	5	52	1.5	47	—	9.4
Bronchitis	32	310	1.4	305	1	9.6
Other diseases of respiratory system	9	151	2.4	55	—	6.1
Diseases of digestive system	65	1,683	3.7	691	—	10.6
Diseases of genito-urinary system	21	5,587	38.0	1,401	—	66.7
Diseases of the skin	15	1,877	17.9	818	—	54.5
Diseases of bones and organs of movement (including rheumatism and arthritis)	19	7,666	57.6	1,399	—	73.6
Senility and ill-defined conditions	165	14,102	12.2	4,070	1	24.7
Burns and scalds	7	180	3.7	119	—	17.0
Other accidents, injuries, etc.	26	2,158	11.9	1,050	—	40.4
All other conditions	54	1,286	3.4	593	—	11.0
TOTALS	696	84,243	17.3	23,017	54	33.1
						1.9

HOME NURSING —

ANALYSIS OF COMPLETED CASES

TABLE 2
Year ended 31st December, 1965

	Stretford Borough		Admin. County	
	No.	Per cent.	No.	Per cent.
1. Total completed cases analysed	696	100	28,958	100
2. Sex and age groups— (age in years)				
0—M	6	0·9	564	1·9
F	7	1·0	285	1·0
5—M	7	1·0	324	1·1
F	4	0·6	245	0·8
15—M	25	3·6	1,330	4·6
F	104	14·9	3,778	13·0
45—M	78	11·2	2,814	9·7
F	99	14·2	4,263	14·7
65—M	127	18·2	5,360	18·5
F	239	34·3	9,995	34·5
All ages M	243	34·9	10,392	35·9
F	453	65·1	18,566	64·1
3. Agency of reference :—				
Services of nurse requested by :—				
General practitioner	590	84·8	23,911	82·6
Hospital	99	14·2	3,694	12·8
P.H. Authority	5	0·7	669	2·3
Direct	2	0·3	612	2·1
Other	—	—	72	0·2
4. Disposal of Cases :—				
Recovered, relieved, etc.	289	41·5	14,998	51·8
Admitted to hospital	136	19·5	5,435	18·8
Died	132	19·0	4,809	16·6
Gone away	18	2·6	1,329	4·6
Out-patient, X-ray, etc....	70	10·1	1,576	5·4
Nurse withdrawn	51	7·3	756	2·6
Other	—	—	55	0·2

SECTION 26 — VACCINATION AND IMMUNISATION

Vaccination against Smallpox

Facilities are provided for the free vaccination of any person desiring it either at the clinics or by general practitioners. Supplies of vaccine lymph are obtained through the Public Health Laboratory Service.

Number of Vaccinations performed during 1965

Primary Vaccinations					Re-vaccinations				
Age in Years					Age in Years				
Under 2	2–	5–	15–	Total	Under 2	2–	5–	15–	Total
350	72	12	1	435	1	4	17	—	22

Age in Years	By Local Health Authority Medical Officers			By General Practitioners			Total		
	Under 5	5+	15+	Under 5	5+	15+	Under 5	5+	15+
Primary Vaccinations ...	205	8	—	217	4	1	422	12	1
Re-vaccinations ...	5	3	—	—	14	—	5	17	—
TOTALS ...	210	11	—	217	18	1	427	29	1

Immunisation against Diphtheria, Whooping Cough, Tetanus

Immunisation against diphtheria, whooping cough and tetanus can be given as a “triple” vaccine, or a “combined” vaccine against diphtheria and whooping cough or tetanus or a “single” vaccine against diphtheria alone. As with smallpox vaccination, immunisations are provided either at the clinics or by general practitioners.

Immunisations against Diphtheria completed during the year 1965

Number of individuals who completed a full course of Primary immunisation during the year 1965			Number of children who were given a re-inforcement injection (i.e., subsequent to complete course)
Born in :—	others		
1962–1965	Under 16 years	Total	Total All ages
646	7	653	982

Immunisations against Whooping Cough completed during the year 1965

Number of individuals who completed a full course of Primary Immunisation during the year 5196			Number of children who were given a re-inforce-ment injection (<i>i.e.</i> , subsequent to complete course)
Born in :—	others		
1962–1965	Under 16 years	Total	Total All ages
643	5	648	144

Notification of cases of Whooping Cough during 1965, after correction of diagnosis

Age Group					Total under 5 Years
0–	1–	2–	3–	4 but under 5	
4	5	2	1	4	16

The following table indicates the proportion of immunisa-tions against diphtheria, whooping cough and tetanus, carried out by Local Health Authority Medical Officers and by Gen-eral Practitioners :—

	By L.H.A. Medical Officers	By General Practitioners	Total
Primary Immunisations (Full Course)	464	189	653
Reinforcement Injections ...	894	90	984
Total	1,358	279	1,637

Poliomyelitis Vaccination

Vaccination against poliomyelitis is at the present time offered free to all persons between the ages of six months and forty years. In addition, doctors and their families, hospital workers, expectant mothers, persons going to visit or reside outside Europe, Canada or America, dental surgeons and their staffs and families, nurses and public health staffs and their families are also eligible for vaccination. Vaccination by means of injections of Salk vaccine has now been largely superseded by the use of Sabin oral vaccine, which gives a greater degree of protection against poliomyelitis. This vaccine is administered by drops on sugar lumps, or on a spoon in the case of young babies, the full course of three doses being given at intervals of four to eight weeks. As with diphtheria immunisation and smallpox vaccination the work is carried out either at clinics or by general practitioners.

Vaccinations performed during 1965

SALK VACCINE

Age Groups	Primary Course Second Injection	Re-inforcement
Born in 1965	2	—
Born in years 1958–1964 inc. ...	3	1
Others—Under 16 years ...	—	—
Total (all ages)	5	1

SABIN VACCINE (Oral)

Age Groups	Number of persons who completed a course	Re-inforcement
Born in 1965	116	—
Born in years 1958–1964 inc. ...	1058	702
Others—Under 16 years ...	90	494
Total (all ages)	1,264	1,196

IMMUNISATION AND VACCINATION STATISTICS 1965

(1) Smallpox

Figures include children aged under 2 years who were vaccinated during 1965. The percentages are based on the number of live births during 1964.

(2) Poliomyelitis, Diphtheria and Whooping Cough

Figures include all children born in 1964 who have been vaccinated at any time. The percentages are based on total live births during 1964.

(3) All percentages are calculated on the same basis as those issued annually by the Ministry of Health to all local health authorities.

	PERCENTAGES VACCINATED			
	Smallpox	Poliomyelitis	Whooping Cough	Diphtheria
	Children under 2	Children born in 1964	Children born in 1964	Children born in 1964
Stretford	26	44	57	57
Administrative County	29	68	70	71

Schedule of Vaccination

Vaccinations and immunisations are carried out in accordance with the following schedule :—

Age	Visit	Vaccine	Injection	Interval
1 to 6 months ...	1	Diphtheria, Tetanus, Pertussis	1	4-6 weeks
	2	Diphtheria, Tetanus, Pertussis	2	4-6 weeks
	3	Diphtheria, Tetanus, Pertussis	3	
7 to 11 months ...	4	Poliomyelitis (oral)	—	4-8 weeks
	5	Poliomyelitis (oral)	—	4-8 weeks
	6	Poliomyelitis (oral)	—	
18 to 21 months ...	7	Diphtheria, Tetanus, Pertussis	4	
Smallpox during the first 2 years, preferably in the second year				
School entry ...		Diphtheria and Tetanus		
8 to 12 years ...		Diphtheria and Tetanus Smallpox re-vaccination		
Over 12 years ...		B.C.G.		

SECTION 28 —

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Tuberculosis

A Tuberculosis Visitor has previously been employed to carry out domiciliary visiting of notified cases of T.B. and contacts and the work in the Borough was carried out through the part-time services of the Tuberculosis Visitor from Lancashire County Council Health Division No. 16. On the resignation of the Tuberculosis Visitor, however, in October, 1965, the work has now been designated to the general Health Visitors for the district and they work in liaison with the Chest Physicians employed by the Regional Hospital Board ; the Health Visitors attend at the Chest Clinic, Stretford Memorial Hospital, on a rota basis.

Extra nourishment may be provided in certain circumstances for persons suffering from tuberculosis, where this is recommended by the Chest Physician, and four persons received assistance under this scheme during the year.

Summary of Tuberculosis Visiting for the year 1965

Home visits

(a) Cases—					
(i) Under 65 years	...	...	...	622	
(ii) 65 years and over	...	...	...	69	
(b) Contacts—					
(i) Under 65 years	...	...	...	478	
(ii) 65 years and over	...	...	...	—
(c) Visits to tuberculosis households included					
above	...	...	...	...	209

B.C.G. Vaccination

B.C.G. Vaccination is offered where appropriate to school children from approximately 13 years of age up to school leaving age, and also including students attending universities, teacher training colleges, technical colleges, and other establishments of further education.

**Number of B.C.G. Vaccinations carried out by Chest Physicians
during year ended 31st December, 1965**

Age Groups	Under 2 years	2-4 years inc.	5-14 years inc.	15 years and over
No. of persons tested for suitability for B.C.G. vaccination ...	29	14	12	9
No. found positive ...	1	—	1	2
No. found negative ...	28	14	11	7
No. of persons vaccinated	39	11	15	5

**B.C.G. Vaccination of School Leavers and Students by
Assistant Divisional Medical Officers
during year ended 31st December, 1965**

Category	Number of Schools	Number of children			
		Tuberculin tested	Found positive	Found negative	Vaccinated with B.C.G.
School children under 14 years	6	746	127	602	602
14 years and over ...		75	18	57	57
Students—Further Education	—	—	—	—	—

Health Education

The staff of the Health Department, and in particular the Assistant Medical Officers of Health and Health Visitors, are continuously engaged in this important branch of preventive medicine. Activities include talks on health matters to mothers attending the clinics and women’s organisations. Mothercraft training is given by Health Visitors to secondary schoolgirls, who compete annually for the “Alice Milne Memorial Prize.”

Literature and posters on a wide range of health matters have been distributed and exhibited on all suitable occasions.

Convalescent Home Care

Convalescent Home Care is arranged in suitable cases on the recommendation of a general practitioner, where the need is for a change of environment, regular meals and rest, not involving active medical treatment. The normal period of recuperative convalescence provided is two weeks, and applicants are assessed to contribute towards the cost involved according to their financial circumstances.

During 1965, 7 adults were admitted to Convalescent Homes under the scheme, and 3 pre-school children, 8 cases being free of charge.

Mothercraft Training

Periods of Mothercraft Training may be arranged in approved cases, in residential homes where mothers can be admitted with their children. Persons selected for such training are in the main "problem families" or those in danger of becoming so. The normal period of stay is eight weeks, and at these Homes mothers are helped in solving their domestic problems and given training in child control and household management. A charge is made according to means.

There were no cases dealt with under this scheme during the year.

Loan of Nursing Equipment

A quantity of nursing equipment is held in store at Lostock Clinic for temporary loan to patients who are confined or being nursed at home. There is no charge for this service.

The following articles were on loan to patients at the 31st December, 1965 :—

19 Air Rings	8 Mattresses
30 Bedpans	12 Tripod walking aids
13 Backrests	2 Spark guards
29 Urinals	6 Lifting apparatus
43 Commode chairs	33 Wheel chairs
7 Bed cradles	2 Walking Sticks
6 Elbow crutches	4 Lifting Hoists
1 Walking Frame	1 Bath seat
1 Bed chair	3 Fracture boards
12 Hospital-type single beds	

Laundry Service

This service is primarily designed to facilitate the care, in their own homes, of persons, particularly the incontinent, aged and chronic sick, who might otherwise have to be admitted to hospital.

Patients are carefully selected and in approved cases sufficient bed linen is supplied on loan to allow a twice weekly delivery and collection. The laundering is undertaken by a hospital of the West Manchester Hospital Management Committee for the local authority.

Patients are assessed to contribute a small charge towards the cost of the service according to their means. During the year the service was provided to 71 patients, involving a total of 1039 case weeks.

Chiropody Service

This service is for the time being limited to the aged, physically handicapped and expectant mothers. The service is free and is provided mainly in the clinics, where sessions were held during the year on a four weekly basis, as follows :—

Old Trafford Clinic	...	18 sessions per month
Mitford Street Clinic	...	12 sessions per month
Trafford Park Clinic	...	2 sessions per month
Lostock Clinic	...	4 sessions per month

Ambulance Service transport is provided where necessary to take patients to the clinic for treatment. Domiciliary treatment may be provided on the recommendation of a medical practitioner, health visitor, midwife or district nurse in cases where the patient is unable, for medical reasons, to visit the clinic.

In addition to the service provided in the clinics, a chiropodist makes a monthly visit to the two old people's homes in the Borough, Grangethorpe and Harry Lord House, and during the year a total of 250 treatments were given to 78 persons at these two Homes.

Summary of Chiropody Treatment provided during the year ended 31st December, 1965

	No. of Clinics	Total No. of Sessions held	No. of treatments given to patients			No. of individuals treated		
			In Clinics	At Home	Total	In Clinics	At Home	Total
Directly provided service ...	4	386	2,698	79	2,777	800	26	826

	No. of treatments given to patients					No. of individuals treated			
	Aged Persons	Handicapped Persons	Expectant Mothers	Total		Aged Persons	Handicapped Persons	Expectant Mothers	Total
Directly provided service ...	2,769	3	5	2,777		820	2	4	826

SECTION 29 — HOME HELP SERVICE

The services of a Home Help are available to expectant mothers, either for a confinement at home or in hospital ; to families deprived of the mother's care due to her illness, or in cases where there is other illness in the family and assistance for the housewife is considered necessary ; and to sick or aged persons living alone who are unable to look after themselves. The majority of Home Helps are now employed in the care of the aged in their own homes, and this forms an extremely important part of the service. The Home Help carries out all the domestic work which would normally be done by the housewife, who she is in effect replacing. She is, therefore, expected to keep the house clean and tidy, prepare meals, carry out the shopping, do the household laundry, look after the children, and attend to any sick person so far as one would expect the ordinary housewife so to do. Duties involving a knowledge of nursing techniques are not expected of her.

The majority of Home Helps are part-time employees who work under the general direction of the Home Help Organiser and her Assistant. The duties of the Home Help Organiser and her Assistant include the recruitment, supervision and training of Home Helps, assessing the amount of help required in households, allocation of work and investigating the financial circumstances of applicants for the service in order to assess their ability to pay towards the cost in accordance with an approved scale.

One Home Help Organiser, one Assistant Home Help Organiser, one full-time Home Help and 183 part-time Home Helps (84 whole-time equivalents) were employed at 31st December, 1965.

Cases attended during 1965

(a) Confinement at home	...	...	...	11
(b) Tuberculosis—aged under 65	...	...	...	1
(c) Mentally disordered—aged under 65	...	...	...	4
(d) Chronic sick aged under 65	...	...	...	5
(e) Chronic sick, aged and infirm (65 or over)	...	...	...	585
(f) All other cases aged 65 or over	...	...	...	4
(g) All other cases aged under 65	...	...	...	78
Total				688

Evening and Night Helps

Home Helps may be provided outside the normal working hours in cases of emergency, and this is of great assistance in providing for the home care of the aged. Evening helps are engaged to pay a visit in the late evening in order to assist the elderly infirm to bed and to ensure that they are comfortable for the night. This service is usually allocated to the very infirm, where the risk of accidents in the home is considered to be rather high.

Evening helps were provided in three cases, and 580 evening visits were made during the year.

A night help is intended to cover emergencies and may be provided to sit up with a sick person who would otherwise be left alone during the night. Help of this nature is provided usually when there are no relatives or in order to relieve a relative of the strain of sitting up during the night for prolonged periods. One case was assisted under this scheme during the year, involving a total of 24 night attendances.

MENTAL HEALTH ACT, 1959

Mental Health Services

Under the Mental Health Act, 1959, the problems of mental illness are approached in much the same way as with other illnesses, and an increasing burden of responsibility for the care and after-care of patients in their own homes falls upon the Mental Welfare Officers employed by the Local Health Authority. These Officers make regular visits offering help and guidance to patients, mainly at the request of general practitioners, but in many cases at the request of hospital authorities for the after-care of patients who have been discharged from hospital.

The Mental Welfare Officers work in close co-operation with general practitioners in dealing with arrangements for the admission of patients to hospital for treatment, in the case of both informal and compulsory emergency admissions. They also maintain a close liaison with the hospitals, and regularly attend the psychiatric clinic held at Stretford Memorial Hospital.

The part-time services of the three Mental Welfare Officers employed by the County Council Health Division No. 16 are available in the Borough.

Training Centres

There are two Training Centres in the area providing facilities for the training of the mentally sub-normal resident in the Stretford, Urmston and Irlam districts. The administration of these centres has not been delegated, however, and remains the responsibility of the County Council Health Division No. 16.

Delamere House Junior Training Centre, Stretford. This is a fifty-place centre offering modern facilities for the training of mentally handicapped children up to the age of 16 years. Transport facilities are provided to and from the centre daily, supervision en-route being provided by a guide specially appointed for the purpose.

Meadowside Adult Training Centre, Urmston. This purpose-built centre was opened in January 1963, and provides sixty places for the training of mentally handicapped adults of both sexes. The type of training given varies with the ability of the trainee, ranging from such simple repetitive tasks as folding circulars for distribution, bundling firewood for resale, to more complicated joinery, assembly work, machining and needle-craft.

A number of contracts have been obtained with local firms covering such activities as the production of bird-houses, birds' feeding tables, umbrella assembly, tray assembly and the packaging of many articles. More varied and ambitious work will be undertaken as training proceeds. (Assistance from local industry in the placement of further contracts would be greatly appreciated).

Most trainees are conveyed by special bus to and from the centre, but those who are able to do so are encouraged to travel by public transport as an integral part of their training. Each trainee receives a modest payment weekly and an incentive bonus system is in operation.

Guardianship

The authority may accept the duties of guardianship, but there were no cases in the Borough during 1965.

Work undertaken by Mental Welfare Officers during 1965

	Number of visits
(a) Work connected with informal admissions to hospitals	78
(b) Application for compulsory admission to hospital :—	
(i) Admission for observation (Section 25) ...	69
(ii) Admission for treatment (Section 26) ...	8
(iii) Emergency admission (Section 29) ...	14
(c) Admission to hospital through Courts (Part V)	4
(d) Reports on home conditions for licence on trial or discharge from hospital	13
(e) Progress reports in cases on licence	10
(f) Psychiatric out-patient clinics attended ...	88
(g) Home visits in respect of prevention, care and after-care :—	
(i) Mentally subnormal (including severely subnormal)	441
(ii) Psychopathic and mentally ill	809
(h) Visits to hospitals to interview patients ...	46
(i) Number of prosecutions for non-attendance at Junior Training Centre undertaken	—
(j) Other visits	88
Total	1,668

MENTAL HEALTH SERVICE

Summary of Cases for the year, 1965

	Mentally ill (inc. Psychopathic)				Mentally subnormal (inc. severely subnormal)				Totals			
	under 16		16 and over		under 16		16 and over		under 16		16 and over	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1. No. of patients on the register at 1st January, 1965	—	—	93	123	17	13	37	34	17	13	130	157
2. No. of patients referred to the Local Health Authority during the year by—												
(a) General Practitioners	—	—	29	30	—	—	2	—	—	—	31	30
(b) Hospitals	—	—	2	18	—	—	1	—	—	—	3	18
(c) Local Education Authorities	—	—	—	—	1	1	1	—	1	1	1	—
(d) Other sources	—	—	4	11	3	2	2	1	3	2	6	12
3. Totals of 1 and 2 above	—	—	128	182	21	16	43	35	21	16	171	217
4. No. of patients removed from the register during the year on account of:—												
(a) Death	—	—	4	2	—	2	—	—	—	2	4	2
(b) Removal out of area	—	—	13	4	1	1	4	4	1	1	17	8
(c) Admitted to hospital for long-term care	—	—	1	2	1	—	1	3	1	—	2	5
(d) No longer in need of Mental Health Service	—	—	14	22	—	—	—	—	—	—	14	22
(e) Other reasons	—	—	2	9	1	—	4	9	1	—	6	18
5. No. of patients on register at 31st December, 1965	—	—	94	143	18	13	34	19	18	13	128	162

MENTAL HEALTH SERVICE

Classification of Patients as at 31st December, 1965

	Mentally ill				Psychopath				Subnormal				Severely Subnormal				Totals				Grand Total	
	Under 16		16 and over		Under 16		16 and over		Under 16		16 and over		Under 16		16 and over		Under 16		16 and over			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
1. Classification of patients under L.H.A. care at 31.12.65 :—																						
(a)	Attending Junior Training Centre	...	...	...	...	94	143	—	—	—	—	—	—	13	2	21	17	18	13	128	162	321
(b)	No. in (a) requiring special care	...	...	...	...	—	—	—	—	—	—	—	—	—	—	—	—	11	10	—	—	21
(c)	Attending Adult Training Centre	...	...	...	...	—	—	—	—	—	—	—	—	—	—	—	—	5	3	—	—	8
(d)	No. in (c) requiring special care	...	...	...	...	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	2	2
(e)	Awaiting admission to Training Centres	...	...	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(f)	No. in (e) requiring special care	...	...	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(g)	Awaiting admission to residential hostel	...	...	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(h)	Receiving home visits and not included in (a) to (g) above	...	...	...	...	94	143	—	—	—	—	—	—	13	2	4	3	2	—	111	148	261
2. No of Patients in area on waiting list for admission to hospital at 31.12.65 :—																						
(a)	In urgent need of hospital care	...	...	...	...	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	2	2
(b)	Not in urgent need of hospital care	...	...	...	...	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	2
3. No. of admissions for temporary residential care during 1965 :—																						
(a)	To N.H.S. hospitals	...	...	...	...	1	—	—	—	—	—	—	—	—	—	—	1	—	—	1	1	3
(b)	Elsewhere	...	...	...	...	—	—	—	—	—	—	—	—	—	—	—	—	3	3	—	—	6

NATIONAL ASSISTANCE ACT, 1948

SECTIONS 29 and 30

WELFARE SERVICES FOR THE HANDICAPPED

(a) General Classes

A scheme for the welfare of handicapped persons (general classes) provides a range of services available to any person who is substantially and permanently handicapped by any disability other than a defect of hearing or sight (whose welfare is provided for under separate schemes). A comprehensive register of all such handicapped persons is maintained, and at the end of the year there were 220 persons on the register, classified according to age and disability.

During 1965 adaptations to the houses of six registered handicapped persons were carried out, free of cost to the applicant, to mitigate the effects of their disabilities.

One handicapped person was sent on holiday to the Holiday Camp at Caister-on-Sea.

Distinguishing badges are issued for fixing to the windscreen and rear windows of cars whose drivers are severely handicapped, in an endeavour to ease their traffic and parking difficulties. At the end of the year there were eleven severely disabled drivers to whom badges had been issued under this scheme.

Facilities for the tuition and practice of handicrafts **are** provided through the services of the Occupational Therapist who is employed by Lancashire County Health Division No. 16. The number of handicapped persons visited at home for instruction in occupational therapy was 58 the total number of visits being 696. A handicraft centre was also held weekly at Lostock Clinic and this was attended by 38 handicapped persons.

The Stretford and District Handicapped People's Club was organised during 1963, on a voluntary basis, to provide a social centre for handicapped persons resident in the Borough. The Club has continued to thrive and regular meetings have been held on Monday evenings at Moss Park School. A varied programme of social activities has been organised and the Club has been well attended, the total membership being 90 at the end of the year. Ambulance service transport was provided for a number of members who were unable to travel on public service vehicles, and voluntary car transport was also provided in a number of cases.

**Details of Handicapped Persons included on the
Register of Handicapped Persons (General Classes)
as at 31st December, 1965**

Disability	Age Groups										Totals	
	Male					Female						
	0-	16-	30-	50-	65-	0-	16-	30-	50-	65-	M.	F.
A/E	—	—	1	7	4	—	—	1	4	4	12	9
F	—	—	—	2	5	—	—	4	21	14	7	39
G	—	1	—	2	1	1	—	—	1	1	4	3
H/L	—	—	1	7	—	—	—	1	7	4	8	12
Q/T	—	—	3	4	7	1	1	3	5	4	14	14
V	1	6	9	20	2	—	7	11	16	9	38	43
U/W	—	—	1	1	—	—	—	1	1	—	2	2
X	—	—	1	—	—	—	—	—	1	—	1	1
Y	—	—	1	2	—	—	—	—	—	—	3	—
Z	—	—	—	2	1	—	—	1	4	—	3	5
TOTALS	1	7	17	47	20	2	8	22	60	36	92	128

CODE :— A/E Amputation.
F Arthritis and Rheumatism.
G Congenital malformations and deformities.
H/L Diseases of the digestive, genito-urinary, heart or circulatory and respiratory systems, and diseases of the skin.

CODE :— Q/T Injuries and diseases of upper and lower limbs and the spine.
V Organic nervous diseases.
U/W Psychoneurosis and psychosis.
X Tuberculosis (respiratory).
Y Tuberculosis (other than respiratory).
Z General diseases and injuries not included above (e.g., asthma, diabetes, malaria).

Welfare Services for the Handicapped

(b) Blind and Partially Sighted Persons

The County Council's Welfare Services for Blind and Partially Sighted Persons are provided under a scheme made in accordance with the provisions of Section 29 and 30 of the National Assistance Act, 1948. The administration of these services in respect of residents in the Borough has been delegated to the Borough Council since 1st April, 1962.

In this area, the day to day operation of the scheme is carried out through the agency of the Manchester and Salford Blind Aid Society, 74, Great Bridgewater Street, Manchester, to which the Home Teacher of the Blind is seconded for duty.

Brief details of the scheme are given as follows :—

1. Register of Blind and Partially Sighted Persons

The scheme requires that a register should be kept of blind persons and also a register of partially sighted persons, and as a condition for obtaining services under the scheme an applicant must be on one or other of these registers. Persons who are referred for registration are visited in the first instance by the Home Teacher of the Blind to complete preliminary details. Arrangements are then made for the person to be examined by a recognised Ophthalmologist, the fee being paid by the Authority.

During the year 1965, 8 examinations and 19 re-examinations were arranged.

(a) Number of registered blind persons as at 31st December, 1965

	Age Group						Total
	0-4	5-15	16-20	21-49	50-64	65 & over	
Males	—	1	3	16	16	27	63
Females	—	1	1	4	18	40	64
Total	—	2	4	20	34	67	127

(b) Number of registered partially sighted persons as at 31st December, 1965.

	Age Group						Total
	0-4	5-15	16-20	21-49	50-64	65 & over	
Males	—	1	1	4	1	2	9
Females	—	—	1	3	2	17	23
Total	—	1	2	7	3	19	32

(c) Source of reference

The following statement is an analysis of the source of reference of persons for inclusion on the blind or partially sighted persons' register :—

(i) General practitioner	...	...	...	—
(ii) Medical source other than general practitioner	...	...	...	—
(iii) National Assistance Board	...	...	4	
(iv) Lay source other than National Assistance Board	...	...	...	4

2. Visiting of Blind and Partially Sighted Persons

When persons have been examined and are included in one of the above-mentioned categories they are visited regularly by the Home Teacher of the Blind whose duties include :—

- Discovery of blind or partially sighted persons and ascertainment of their needs.
- The visitation of blind or partially sighted persons in their homes or elsewhere within the area of the Council.
- Teaching them whenever practicable to read embossed literature.
- Instructing them in simple pastime occupations in their homes or elsewhere and in methods of overcoming the effects of their disability.
- Generally assisting in promoting their welfare.
- Advising them of all available social services.
- Paying particular attention to those persons, who are also suffering from some other form of handicap, the nature of which is such as to increase the disability of blindness or partial sight.

- (h) Organising Social Centres and Handicraft Classes.
- (i) Advising the blind or partially sighted persons how to claim the financial assistance to which they are entitled from pensions or the National Assistance Board.

3. Workshops for the Blind

Arrangements have been made for a number of blind persons to be employed in Workshops which are provided by voluntary agencies for the blind. At the end of the year three men and four women registered in the Borough were employed in the workshops, engaged in such occupations as machine knitting, brush-making, mattress making and shoe repairing.

4. Home Employment

Blind persons desirous of engaging in work on their own account may be assisted by having their earnings augmented in accordance with an approved scale. There were no persons receiving assistance in this way at the end of the year.

5. Employment in Open Industry

Many blind persons do not wish to be employed in a Workshop for the Blind but prefer to work in open industry. In appropriate cases steps may be taken in consultation with the Disablement Resettlement Officer from the Ministry of Labour and the Employment Officer of the Royal National Institute for the Blind to obtain suitable employment.

Occupations of Blind Persons employed in open industry as at 31st December, 1965

Occupation	Men	Women	Total
Music Teacher	1	—	1
Typist	3	—	3
Braille Copyist	—	1	1
Machine Tool Operator ...	8	—	8
Fitter	1	—	1
Upholsterer	1	—	1
Labourers	2	—	2
Domestic and canteen workers	—	2	2
Piano Tuner	1	—	1
Process Worker	—	1	1
Miscellaneous	3	—	3
	—	—	—
	20	4	24
	==	==	==

6. General Social Welfare of the Blind

(a) Library Services

Arrangements are made for the loan of Braille books through the National Library for the Blind.

Talking books are supplied through the Nuffield Talking Book Library for the benefit of blind persons who have been unable to learn Braille. Ten persons were in possession of talking-book reproducing machines at the end of the year.

(b) Social and Handicraft Centres

Social and Handicraft Centres are held at the Civic Theatre, Dorset Street, Stretford on the following days :—

Social Centre ... Thursdays, 2-00 p.m. to 4-00 p.m.

Handicraft Centre ... Tuesdays, 2-00 p.m. to 4-00 p.m.

The Centres have proved to be highly successful and are very well attended.

(c) Facilities for Holidays

Arrangements may be made for the provision of holidays for blind persons of one or two weeks' duration, longer holidays being arranged only in very exceptional circumstances.

Applicants are assessed to contribute towards the cost of the holiday in accordance with the scale for handicapped persons, and holidays were arranged for two persons under this scheme during 1965.

7. Residential Accommodation for Aged Blind Persons

For various reasons it is found in some cases that aged blind persons cannot be looked after satisfactorily at home or they may be living alone and are in need of care and attention within the meaning of Section 21(1)(a) of the National Assistance Act, 1948. In such cases arrangements may be made for their admission to Homes for the Blind managed by Voluntary Organisations. Two people were resident in such homes during 1965.

8. Follow-up of Registered Blind and Partially Sighted Persons

The following statement gives information as to the incidence of blindness.

	Cause of Debitity						
	Cataract	Glaucoma	Senile Macular Degeneration	Myopia	Blindness from Diabetes	Trauma	Others
Number of cases receiving treatment during the year in accordance with recommendations given under Section F of Form B.D.8.	13	6	6	9	6	—	10

MEDICAL EXAMINATIONS

Medical examinations carried out by the medical staff during 1965 included the following :—

	No. of examinations
(i) Fitness for employment—County Council employees :—	
(a) No. of medical examinations carried out in connection with posts designated as requiring them	49
(b) No. of forms M.E.5 (statements of fitness) scrutinised	182
(c) No. of medical examinations carried out following scrutiny of Form M.E.5.	26
(ii) For entry to Stretford Borough Superannuation and Sickness Pay Schemes ...	98
(iii) For entry to other Local Authority Superannuation and Sickness Pay Schemes ...	—
(iv) Extension of Sickness Pay	14
(v) Children Act, 1948 } Children and Young Persons Act, 1933 ... }	24
(vi) Employment of children outside school hours	139
(vii) Entry to Teachers' Training Colleges ...	69
(viii) Children attending Camp Schools	1

NURSERIES AND CHILD MINDERS REGULATION ACT, 1948

All premises used as day nurseries and all child minders as defined in this Act must be registered and comply with the standards adopted by the Local Health Authority.

These standards are designed to prevent overcrowding, to ensure that adequate facilities are available and in general to provide for the health and safety of the children. Periodic inspections are carried out by the medical staff to ensure that the conditions of registration are observed.

There were five Registered Child Minders in the Borough as at the 31st December, 1965, the total number of authorised child places being 28. In addition, there were two private Day Nurseries, providing a total of 85 authorised child-places.

**ANNUAL REPORT
of the
CHIEF PUBLIC HEALTH INSPECTOR
for the
YEAR ENDED 31st DECEMBER, 1965**

To the Chairman and Members
of the Health Committee.

Mr. Chairman, Ladies and Gentlemen,

I have the privilege to present to you my Seventeenth Annual Report on the work performed by your Public Health Inspectors, supported by Technical and Clerical Staff, in the interests of Public Health and also to report on the activities of the Public Cleansing Service. The manifold duties and responsibilities laid upon the Council by Statutes, Regulations and Bye-laws have been discharged faithfully and the aims of the Department have been pursued with energy and persistence throughout the year. These activities are reported fully in the pages which follow and it will be noted that a new duty, namely the inspection of offices and shops in accordance with new legislation, has been well covered and has resulted in pronounced improvements in these non-industrial occupations.

Continued emphasis has been placed on the importance of clean air as a health measure and to this end a Domestic Heating and Clean Air Exhibition was held during April, 1965, at the Civic Theatre. Several trade interests and the local press co-operated in giving ample publicity to the modern appliances and smokeless fuels upon which progress towards a cleaner atmosphere must be based. This Department took the opportunity of illustrating the benefits of clean air and gave full guidance on the grant structure. Educational films relating to the prevention of air pollution were shown in a separate hall during the period of the exhibition. Progress in the creation of smoke control areas has been gratifying. By the end of the year six areas were in full operation, two more had received confirmation, and the ninth was in course of

survey. The general public are becoming more and more aware of the benefits which accrue from a reduction in visible pollution and this is exemplified by the numbers of persons who convert appliances in advance of the scheduled programme

Following the acceleration of the clearance programme in respect of unfit houses a measure of redevelopment has already been achieved, and although much still remains to be done a solution to the problem of urban renewal can now be seen as attainable within a reasonable number of years. It will be seen that problems often follow in the wake of progress and this has occurred in relation to domestic smoke control. Households without any open fire are unable to burn unwholesome materials and in consequence a service for the collection and incineration of dressings and incontinence pads was introduced during the year. Again on account of lack of facilities for burning material at home some families find one regulation dustbin inadequate despite the regular weekly collection. To meet this situation a separate collection of paper salvage is to be instituted in order to cover progressively the smoke control areas. In the meantime requests for a second dustbin to be emptied will be resisted except in the case of large families.

Throughout the year members of the Council have given every encouragement and the support of Health Committee has been most gratifying. Every assistance has been furnished by other Departments and my own staff have worked with loyalty and enthusiasm. It is pleasing to acknowledge these helpful influences without which such a satisfactory report could not have been produced.

Yours obediently,

J. KAY,
Chief Public Health Inspector.

(1) INSPECTION OF DISTRICT

(a) Investigation of Complaints

Environmental conditions prejudicial to health or otherwise unsatisfactory are detected by your Inspectorate during day to day duties and immediate action is taken as a result. In addition to this constant control the Department receives complaints either written or verbal of defects, disrepair or departures from hygienic standards and these are given prompt attention. Complaints received and investigated during the year are enumerated in the following table :—

Nature of Complaint						Number Received
Obstructed drains	...	...	...	...	...	79
Obstructed cellar drains	...	...	...	...	...	18
Obstructed waterclosets	...	...	...	...	...	18
Obstructed yard drains	...	...	...	...	...	19
Defective waterclosets	...	...	...	...	...	18
Defective plaster	...	...	...	...	...	11
Defective house roofs	...	...	...	...	...	86
Defective windows	...	...	...	...	...	15
Defective walls	...	...	...	...	...	17
Defective fireplaces	...	...	...	...	...	6
Defective gutters	...	...	...	...	...	10
Defective chimneys	...	...	...	...	...	12
Defective drains	...	...	...	...	...	13
Dampness of house	...	...	...	...	...	49
Accumulation of refuse	...	...	...	...	...	55
General insanitary conditions	...	...	...	...	...	24
House infested with vermin	...	...	...	...	...	112
Rats and mice infestation	...	...	...	...	...	192
Requests for Inspector to call (nature of complaint not stated)	...	...	...	...	...	6
Food	...	...	...	...	...	32
Miscellaneous	...	...	...	...	...	72
TOTAL						864

(b) Nature of Visits and Inspections

The volume and diversity of duties undertaken during 1965 are illustrated in the classified statement of visits and inspections made by your staff, reproduced below. A striking feature of recent years has been the increased activity in relation to domestic smoke control where the annual total of visits is running at a figure in excess of 6,000, and the grand total of visits for all purposes again exceeds 20,000. Over the past five years the total visits recorded have increased in the following proportions, 13,368, 15,481, 18,206, 20,625 and 22,714.

Visits and Inspections								Number
Houses—								
Public Health Acts	...	...	...	...	...	...	...	2,235
Housing Acts	...	...	...	...	...	...	...	1,693
Improvement Grants	...	...	...	...	...	...	...	257
Overcrowding	...	...	...	...	...	...	...	1
Infectious Diseases	...	...	...	...	...	...	...	161
Houses in Multiple Occupation	...	...	...	...	...	...	...	350
Drainage Inspections and Tests	...	...	...	...	...	...	...	1,162
Rivers and Streams	...	...	...	...	...	...	...	41
Tents, Vans and Sheds	...	...	...	...	...	...	...	12
Vacant Land and Dumps	...	...	...	...	...	...	...	64
Stables and Piggeries	...	...	...	...	...	...	...	2
Rats and Mice Infestation	...	...	...	...	...	...	...	157
Insect Infestations	...	...	...	...	...	...	...	337
Visits for Estates Department	...	...	...	...	...	...	...	983
Factories with Power	...	...	...	...	...	...	...	255
Factories without Power	...	...	...	...	...	...	...	9
Workplaces	...	...	...	...	...	...	...	1
Outworkers' Rooms	...	...	...	...	...	...	...	43
Offices, Shops and Railway Premises Act	...	...	...	...	...	...	...	352
Cinemas, Public Houses, etc.	...	...	...	...	...	...	...	26
Petroleum Acts	...	...	...	...	...	...	...	119
Schools	...	...	...	...	...	...	...	28
Shops Act	...	...	...	...	...	...	...	88
Offensive Trades	...	...	...	...	...	...	...	2
Smoke Observations	...	...	...	...	...	...	...	372
Boiler Houses	...	...	...	...	...	...	...	195
Smoke Control Areas	...	...	...	...	...	...	...	6,262
Clearance Areas	...	...	...	...	...	...	...	2,208
Improvement Areas	...	...	...	...	...	...	...	1
Interviews with Owners, etc.	...	...	...	...	...	...	...	438
Revisits to Premises under Notice—Public Health Acts	...	...	...	...	...	...	...	1,093
Revisits to Premises under Notice—Housing Act	...	...	...	...	...	...	...	2
Visits re Dustbins	...	...	...	...	...	...	...	518
Miscellaneous	...	...	...	...	...	...	...	1,880
Meat and Foods—								
Food Inspection	...	...	...	...	...	...	...	171
Butchers, Shops and Stalls	...	...	...	...	...	...	...	79
Fishmongers and Poulterers	...	...	...	...	...	...	...	15
Greengrocers and Fruiterers	...	...	...	...	...	...	...	68
Grocers and Other Food Shops	...	...	...	...	...	...	...	222
Bakehouses	...	...	...	...	...	...	...	109
Fried Fish Shops	...	...	...	...	...	...	...	12
Dairies and Milk Shops	...	...	...	...	...	...	...	103
Food Vehicles	...	...	...	...	...	...	...	10
Ice Cream Premises	...	...	...	...	...	...	...	10
Restaurants and Canteens	...	...	...	...	...	...	...	249
Other Food Premises	...	...	...	...	...	...	...	76
Milk Samples	...	...	...	...	...	...	...	40
Food and Drug Samples	...	...	...	...	...	...	...	150
Ice Cream Samples	...	...	...	...	...	...	...	17
Other Samples	...	...	...	...	...	...	...	36
Total								22,714

(c) Resultant Action

Remedial action to secure the repair of defects, and compliance with bye-laws, regulations and statutory provisions is obtained by service of notices in respect of conditions found to be prejudicial to the health, welfare and safety of the public. The aims of the Department are normally satisfied by informal action but in a minority of cases statutory notices require to be served and these are enumerated in the summary below :—

STATUTORY NOTICES

Section of Act	Subject	Out-standing 31st Dec., 1964	Served	Abated	Out-standing 31st Dec., 1965
Public Health Act, 1936					
24	Maintenance of Combined Drain. ...	—	7	7	—
39	Drainage ...	2	18	17	3
45	Defective watercloset	1	2	3	—
60	Means of escape in case of fire ...	1	1	2	—
56	Defective yard surfaces ...	—	1	1	—
91–100	Conditions prejudicial to health ...	3	33	30	6
83–85	Cleansing of filthy and verminous premises ...	—	1	1	—
Public Health Act, 1961					
17(1)	Summary power to remedy stopped-up drain — 48 hour notice ...	—	13	12	1
18	Drainage. ...	—	5	4	1
25	Emergency measures to deal with dangerous buildings ...	—	9	1	8
26	Defective premises ...	—	33	23	10
Housing Act, 1957					
16	Time and Place Notices. ...	1	—	1	—
78(5)	Notice of Over-crowding ...	—	1	—	1
	TOTAL ...	8	124	102	30

The results achieved by the enforcement work of your Inspectors in the positive improvement of the environment by repair of defects and abatement of unsatisfactory conditions are summarised below :—

Nuisances Abated and Defects Remedied							Total
Houses—							
Chimneys and stacks repaired	...	...	...	...	...	...	17
Coppers provided or repaired	...	...	...	...	...	...	2
Ceiling plaster repaired	...	...	...	...	...	...	14
Dampness abated	...	...	...	...	...	...	5
Doors repaired or renewed	...	...	...	...	...	...	9
Eavesguttering repaired or renewed	...	...	...	...	...	...	34
Fireplaces repaired or renewed	...	...	...	...	...	...	2
Floors repaired or renewed	...	...	...	...	...	...	12
Handrails fixed in staircases	...	...	...	...	...	...	1
Overcrowding abated	...	...	...	...	...	...	9
Roofs repaired or renewed	...	...	...	...	...	...	61
Repairs to water supplies...	...	...	...	...	...	...	4
Rooms cleansed and re-decorated	...	...	...	...	...	...	1
Rainwater pipes repaired or renewed	...	...	...	...	...	...	17
Sinks repaired or renewed	...	...	...	...	...	...	1
Sashcords provided	...	...	...	...	...	...	5
Stairs repaired or renewed	...	...	...	...	...	...	1
Walls (external) repointed, etc.	...	...	...	...	...	...	66
Wall plaster repaired	...	...	...	...	...	...	22
Windows repaired or renewed	...	...	...	...	...	...	37
Water supplies provided	...	...	...	...	...	...	1
Waste pipes repaired or renewed	...	...	...	...	...	...	11
Yards and passages paved or repaired	...	...	...	...	...	...	7
Walls repaired	...	...	...	...	...	...	5
Dangerous conditions remedied	...	...	...	...	...	...	13
Drainage—							
Drains cleared of obstructions	...	...	...	...	...	...	95
Drains repaired or reconstructed	...	...	...	...	...	...	27
Inspection chambers provided or repaired	...	...	...	...	...	...	2
Waterclosets—							
New waterclosets provided	...	...	...	...	...	...	3
Watercloset compartments repaired	...	...	...	...	...	...	1
Watercloset pedestals provided	...	...	...	...	...	...	1
Waterclosets cisterns provided or repaired	...	...	...	...	...	...	6
Dustbins—							
New provided	...	...	...	...	...	...	1,279
Miscellaneous—							
Offensive accumulations removed	...	...	...	...	...	...	6
Vacant land cleared	...	...	...	...	...	...	4
Animals—Nuisance abated	...	...	...	...	...	...	1
Dirty premises cleansed	...	...	...	...	...	...	5
Contraventions remedied in—							
Shops	...	...	...	...	...	...	1
Food premises generally	...	...	...	...	...	...	6
Factories and workplaces	...	...	...	...	...	...	4
Total							1,798

(2) FOOD CONTROL

(a) Unsound Food

Following the examination of foodstuffs in shops, bake-houses, canteens and warehouses the following items of food were found to be unsound or unwholesome and were surrendered for destruction :—

			Cwts.	Lbs.
Meat at retail shops	...	...	1	15
Canned Meats	...	...	6	92
Fish	...	...		81
Fruit and Vegetables		...	1	72
Frozen egg	...	...	2	0
Margarine	...	...		20
Sugar	...	...		20
Miscellaneous	...	...		35
Total			12	111

(b) Foreign Bodies in Food

Commodity	No.	Foreign Body
Milk	2	Caterpillar in milk bottle. Bottle contaminated with rust.
Canned Meat	1	Luncheon meat—cotton fibres, solder and iron salts.
Meat Pies	1	Mouldy meat pastry.
Vegetables	1	Ground beetle in frozen peas.
Confectionery	1	Mouldy swiss roll.
Other Food	2	Leg of Lamb—faecal pellets. Ground pepper sauce—part of larva

As a result of two prosecutions under Section 2 of the Food and Drugs Act, 1955, fines and costs were imposed totalling £50 5s. 0d.

(c) Food Hygiene

During the routine inspection of food premises standards of hygiene were generally found to be very satisfactory, but in a few instances contraventions of the Food Hygiene (General) Regulations were found. The prosecution of offences resulted in the imposition of fines and costs totalling £191 5s. 0d. in respect of the following contraventions.

Regn.	Nature	Number of	
		Offences	Convictions
5	Insanitary premises	1	1
6	Cleanliness of equipment	2	2
8	Protection from contamination	1	1
14	Sanitary conveniences	2	2
16	Provision of wash-hand basins	2	2
19	Washing facilities (for equipment)	2	1
21	Ventilation	1	1
23	Cleanliness and repair	2	2
24	Accumulation of refuse	1	1
TOTAL ...		14	13

(d) Food and Drugs Sampling

Regular sampling of food and drugs continued during the year in accordance with an agreed schedule to avoid overlapping with the type of sample obtained by neighbouring local authorities. From a total of 152 informal samples 16 samples showed irregularities of composition or labelling when examined by the Public Analyst. The results of sampling are summarised in the following tables :—

Food and Drugs Samples

Sample	No. of Samples		Genuine	Unsatisfactory	
	Formal	Informal		Analysis	Labelling
Foods	Nil	138	123	10	5
Drugs	Nil	14	13	1	—

Details of unsatisfactory Samples

Sample	On Analysis	By Labelling
Foods	Beans—marked on surface by insects prior to canning Butter—rancid Luncheon meat—iron salts, tin, solder. Cooked lamb—faecal pellets Ice lolly—calcium chloride (refrigerant)	Crab paste—size of lettering less than recommended. Orange crush—did not comply with Regulations. Sultanas—did not specify ingredients. Slimasoup—ingredient generic term used. Dried mixed vegetables—order of ingredients incorrect.
Drugs	Ancolin—disintegration time excessive.	None.

(e) Bacteriological Samples

The samples of food submitted for bacteriological sampling during the year totalled 94 and of these only 2 samples of ice cream proved unsatisfactory. Following examination of the plant and adequate maintenance and sterilisation follow up samples were reported to be satisfactory. A summary of all samples obtained is given below :—

Bacteriological Testing of Food

Sample	No. Taken	No. Unsatisfactory
Ice cream	14	2
Fresh cream	2	—
Luncheon meat	2	—
Milk	36	—
Pasteurised egg	40	—
TOTAL	94	2

(f) Food Premises

At the end of the year there were 463 food premises and the standard of hygiene, construction and equipment was very satisfactory apart from a few cases where remedial action was taken. The various types of food premises are shown in the following classified statement :—

CLASSIFIED LIST OF FOOD PREMISES

Type of Business	Number
Grocers and provision dealers	133
Greengrocers and Fruiterers	40
Meat Shops	39
Confectioners	41
Fish friers	24
Sugar Confectionery, ice cream, etc.	53
Canteens, cafes, licensed premises	115
Others	18
TOTAL ...	463

(g) Liquid Egg Pasteurisation

There is one plant within the Borough for the pasteurisation of liquid egg and since it was first commissioned eight years ago every sample of pasteurised egg has been reported as satisfactory. During the year under review 40 such samples of liquid egg were tested by the Alpha-Amylase Test and proved to be satisfactorily pasteurised.

No difficulty was experienced in the administration of the Liquid Egg (Pasteurisation) Regulations, 1963, in the second year since their introduction. No instances were found where liquid egg was used as an ingredient in the preparation of foods for sale unpasteurised, except where removed from the shell on preparation premises and used forthwith or kept at a temperature not exceeding 50°F. and used within 24 hours.

(3) PREVENTION OF AIR POLLUTION

(a) Clean air—a health measure

The production of smoke and fumes in any urban environment both from industry and domestic and commercial buildings results in pollution of the atmosphere with substances which can have a deleterious effect upon human lungs. The level of pollution varies with the seasons and with climatic variations and at times of greatest concentration of pollutants in the lower atmosphere persons with chest ailments suffer considerable distress and persons with healthy lungs can have their breathing impaired. Smog conditions can be the cause as well as the enemy of bronchitis.

These harmful pollutants are being reduced in a two fold manner. Industrial plant has been modernised progressively to achieve more efficient combustion aided by improved equipment and instrumentation. All new steam-raising plant must be capable of being operated smokelessly to obtain prior approval. The creation of smoke control areas has reduced the concentration at ground level not only of smoke but also of sulphur dioxide.

(b) Industrial Programme

Repeated observations have confirmed that the level of air pollution in Trafford Park has been progressively improved in recent years and visible pollution is no worse than many residential areas. The infrequent emissions of smoke which occur are usually associated with lighting-up from cold, or with flashing-in of oil-fired boilers at short notice for a sudden unexpected steam demand, or, possibly, on account of a breakdown which is invariably reported to this Department.

Improvements in steam raising plant during the year included the installation of four automatic oil-fired boilers, two coal-fired package boilers, one conversion to fuel oil, the repositioning of a grit arrestor, the use of smokeless fuel in two mobile cranes and the conversion of a third mobile crane to diesel operation.

It was only found necessary to institute legal proceedings for dark smoke emission in one instance and the successful prosecution resulted in the imposition of a fine of £5 and £7 7s. 0d. costs.

(c) Domestic Smoke Control

Well over 6,000 visits were made during the year in connection with Smoke Control Areas which illustrates the energy with which the aims of the Department relating to clean air are being pursued.

Six Smoke Control Orders covering 1,087 acres and including 4,972 dwellings were in operation before the end of the year. Two further Smoke Control Orders (Areas Nos. 7 and 8) had been confirmed by the Minister during the year but were not operative at 31st December, 1965. These two areas together account for a further 449 acres and include 3,412 dwellings. This means that the programme is more than half accomplished when allowance is made for the areas devoted exclusively to industry or intended for early redevelopment under provisions of the Housing Acts.

(d) Measurement and Testing

The measurement of levels of air pollution continued during the year from daily and monthly instruments maintained by the Standing Conference of Local Authorities on Air Pollution (Region South West from Manchester). There was a significant decrease in the concentration of smoke as compared with the previous year whilst the figures for deposited matter and sulphur dioxide were broadly comparable with the results obtained during 1964. In the case of sulphur dioxide it should be remembered that wind direction and other climatic conditions play a paramount part in dispersal of pollution. Where levels of visible pollution are reduced the invisible pollutants (including sulphur dioxide) are dispersed more readily. In this connection there is still room for improvement even though the average concentration of smoke recorded at the Town Hall fell from 208 in 1964 to 182 in 1965. With the progressive extension of smoke control areas this figure will be drastically reduced.

DAILY MEASUREMENT OF SMOKE AND SO₂

Expressed as Microgrammes per Cubic Metre—1965

1. SITE—TOWN HALL, STRETFORD

Month	SMOKE			SULPHUR DIOXIDE		
	Average	Highest	Lowest	Average	Highest	Lowest
January ...	322	692	44	343	672	86
February ...	301	782	148	400	685	234
March ...	227	776	36	292	665	150
April ...	180	365	56	271	445	127
May ...	97	208	36	163	430	57
June ...	62	168	12	149	366	35
July ...	63	118	27	185	288	79
August ...	66	187	27	161	306	58
September...	116	404	39	210	319	74
October ...	216	550	52	258	664	100
November...	266	872	52	461	1,230	100
December ...	277	1,126	58	506	1,284	106

2. SITE—A.E.I. (Manchester) LTD., TRAFFORD PARK

MONTH	SMOKE			SULPHUR DIOXIDE		
	Average	Highest	Lowest	Average	Highest	Lowest
January ...	226	540	60	283	628	114
February ...	253	920	100	377	710	214
March ...	221	770	40	276	701	94
April ...	142	360	50	219	432	107
May ...	80	190	40	160	304	49
June	63	170	20	142	563	34
July ...	58	150	22	92	148	47
August ...	62	268	21	63	126	29
September...	108	407	30	163	383	52
October ...	208	464	33	191	373	74
November...	258	877	75	403	803	217
December ...	227	780	30	356	904	89

ESTIMATION OF DEPOSITED MATTER
by Deposit Gauges
Tons per square mile per month
during 1965

Site	Rain (ins.)	pH Value	Insoluble Matter	Soluble Matter	Total Solids
A.E.I. (Mcr.) Ltd., (West Works) TRAFFORD PARK :					
January	3·27	4·2	26·69	20·87	47·56
February	0·28	4·8	30·64	8·30	38·94
March	1·34	4·2	31·23	7·48	38·71
April	2·09	4·4	18·19	9·22	27·41
May	2·99	4·1	15·58	7·55	23·13
June	2·29	4·1	11·49	6·76	18·25
July	3·62	3·7	18·25	9·95	28·20
August	2·32	4·1	14·48	9·16	23·64
September	6·34	4·1	17·68	10·26	27·94
October	1·62	4·0	24·62	10·67	35·29
November	2·32	4·0	26·83	9·55	36·38
December	4·69	4·0	29·19	11·22	40·41
MONTHLY MEAN ...					32·15

ESTIMATION OF SULPHUR DIOXIDE

expressed as mgms. SO₃/day/100 cm² Batch A.Pb02

Monthly Results—1965

MONTH	STATIONS		
	Lostock Library	A.E.I. Ltd. Mosley Road	A.E.I. Ltd. West Works
January	5.42	9.45	6.68
February	3.86	6.20	6.19
March	2.86	6.32	3.97
April... ..	2.04	5.88	6.28
May	2.11	4.94	4.13
June	1.34	6.02	4.50
July	1.16	3.61	4.27
August	0.95	3.97	4.27
September	1.86	4.08	3.39
October	1.95	4.04	3.46
November	3.51	5.64	5.34
December	3.03	6.83	6.91
MONTHLY MEAN ...	2.51	5.58	4.95

(4) HOUSING CONDITIONS

(a) Standard of Existing Property

At the end of the year there were 18,612 inhabited dwellings within the Borough, including 4,244 which are Council owned. Of the 14,368 premises in private ownership the majority are in good repair but some 10 per cent. are substandard and without adequate modern amenities. Redevelopment of areas of substandard property is proceeding and by the end of 1965 more than 1,000 houses had been represented as unfit. Before 1970 it is anticipated that statutory action under the Housing Acts will have included a further 1,200 substandard houses.

(b) Repairs to Dwellinghouse Property

During the course of 1965 the number of dwellings inspected for housing defects totalled 2,998 and 4,456 inspections were made for this purpose. The number of unfit houses made fit (at reasonable expense) was 375 and of these 235 were repaired by the owner after informal action whilst the repair of the remaining 140 required formal notice under the Public Health Acts.

(c) Clearance of Unfit Dwellings

Clearance Areas Nos. 29, 30 and 31 were declared during the period under review and these three areas included 147 dwellings. When acquired by the Council for demolition and redevelopment 498 persons in 184 families will be offered alternative accommodation. Action taken in respect of previously declared Clearance Areas involved the displacement of 344 individuals comprising 76 families prior to the demolition of 269 dwellinghouses which had been confirmed as unfit following local Inquiries into Compulsory Purchase Orders. Details of the 147 dwellings represented during 1965 are shown in the following table :—

DWELLINGS REPRESENTED AS UNFIT FOR HUMAN HABITATION

Date	Area No.	Properties	Number	
			Dwellings	Occupants
12.1.65	29	9-13 Cricket Street	3	12
6.4.65	30	95-153, 159, 161 Chorlton Road 146-162, 168-172, 184, 186 Cornbrook Street 41-67, 50-58 Dudley Street 28-68 Augustus Street 1-7; 6-18 Gladstone Street 4-12 (consec.) Moss Grove Terrace 2-15 (consec.) Nelson Terrace 3-7, 9-21 Moss Lane West 1-5, 7/9, 11-27 Palatine Buildings, Moss Lane West	141	481
7.12.65	31	476-480, Chester Road	3	5
TOTALS			147	498

(d) Improvement of Dwellinghouses

All dwellings within the Borough are provided with separate water closets and a sufficient supply of water from the town's mains. In relatively few cases are houses without a fixed bath and hot water supply and if we discount houses lacking these amenities but scheduled for clearance action then the number of otherwise fit houses without fixed bath and hot water is only 25. There are of course almost 3,000 houses which still rely on an external watercloset but indoor sanitation is being provided progressively as more owners of property apply for improvement grants.

Of the 55 applications for standard improvement grants during the year 51 were approved and the same number of dwellings were improved. The actual amount paid in grants totalled £2,478 11s. 6d. which represented an average grant of £48 12s. 0d. per house. The amenities provided by way of grant were as follows :—

Fixed bath	19
Shower	—
Wash hand basin	16
Hot water supply	11
Water closet (indoors)	51
Food Store	26

(5) OFFICES, SHOPS & RAILWAY PREMISES ACT, 1963

(a) Registrations and General Inspections.

Premises at which assistants work less than twenty-one hours per week in the aggregate and premises run as family businesses are exempted from the provisions of the Act whilst H.M. Factory Inspector is responsible for all local authority and government offices and offices within the curtilage of factories. Consequently the Council's register does not show the total number of premises within the Borough.

During the year 230 initial inspections of premises were undertaken and 122 revisits. It will be seen that the total of registered premises at 31st December, 1965, as shown in the following table was 581 of which 364 (including 134 inspected during 1964) have received a general inspection.

Class of Premises	Number of premises registered during the year	Number of registered premises at end of year	Number of registered premises receiving a general inspection during year
Offices	27	219	80
Retail Shops	28	289	128
Wholesale Shops, warehouses	1	32	12
Catering establishments open to the public, canteens	4	31	10
Fuel storage depots	1	10	—
TOTALS	61	581	230

Total number of visits of all kinds by
inspectors to registered premises under the Act ... 352

In this Schedule—

“ general inspection ” means any inspection of premises to which the Act applies which is undertaken for the purpose of ascertaining whether all the relevant provisions of the Act and instruments thereunder are complied with as respects those premises ; and “ registered premises ” means any premises in respect of which a notice under section 49 of the Act has been received by a local authority and the expression “ premises registered ” shall be construed accordingly.

(b) Contraventions of the Act

During the year 425 contraventions were found during general inspections. In the main the offences consist of lack of thermometer and first aid boxes, cleanliness of premises (redecoration required), defects to plaster, floors, floor coverings, lack of handrails and defects and lack of lighting to sanitary accommodation, together with lack of hot water for washing facilities.

ANALYSIS OF CONTRAVENTIONS

Section	Number of Contraventions found	Section	Number of Contraventions found
4	Cleanliness 86	14	Seats (Sedentary Workers) ... —
5	Overcrowding —	15	Eating Facilities —
6	Temperature Insufficient heating 21) No thermometer 84) ... 105	16	Floors, passage and stairs ... 43
7	Ventilation 8	17	Fencing exposed parts machinery 10
8	Lighting 3	18	Protection of young persons from dangerous machinery —
9	Sanitary Conveniences ... 35	19	Training of young persons working at dangerous machinery —
10	Washing facilities 16	23	Prohibition of heavy work ... —
11	Supply of Drinking Water ... 3	24	First Aid General Provisions 78
12	Clothing Accommodation ... 9	25	Abstract not displayed ... 24
13	Sitting facilities 5		TOTAL ... 425

(c) Reported Accidents

Seven accidents all non-fatal and of a minor nature were reported during 1965. Four reported accidents were investigated but no negligence was found and there was no need for further action.

Workplace	No. Reported	Total No. Investigated	Action Recommended			No. Action
			Prosecution	Formal Warning	Informal Advice	
Offices	1	1	—	—	—	1
Retail Shops	2	—	—	—	—	—
Wholesale Shops, Warehouses	1	2	—	—	—	2
Catering Establishments open to public, canteens	3	1	—	—	—	1
Fuel Storage Depots ...	—	—	—	—	—	—
TOTALS	7	4	—	—	—	4

ANALYSIS OF REPORTED ACCIDENTS

	Offices	Retail Shops	Wholesale Warehouses	Catering establishments open to public, canteens	Fuel Storage Depots
Machinery	—	—	1	—	—
Transport	—	—	—	—	—
Falls of persons	1	—	—	3	—
Stepping on or striking against object or person ...	—	—	—	—	—
Handling goods	—	1	1	—	—
Struck by falling object ...	—	—	—	—	—
Fires and Explosions ...	—	—	—	—	—
Electricity	—	—	—	—	—
Use of hand tools	—	—	—	—	—
Not otherwise specified ...	—	—	—	—	—

(d) Heating Arrangements

In order to ascertain the sufficiency of heating arrangements several revisits were made to premises which had previously received a general inspection. In twenty-one cases, mainly retail shops, the heating facilities in the selling area of the shop were inadequate. Even when shop doors are repeatedly opening and closing it is considered that the heating arrangements should be such as to maintain a recommended temperature as near as possible to 60·8°F.

(e) Standard of Lighting

Regulations have not yet been made prescribing standards of lighting and during October, November and December 1965, visits were made to obtain a general impression of the standard of lighting. The general conclusions reached were that no case of poor lighting existed within the Borough, but in the case of offices approximately one-third were only moderately well lit with an illumination of less than twenty lumens per square foot. In all cases the lighting in the selling areas of shops was satisfactory whilst that in the storerooms was less satisfactory. Where this reduced standard obtained in storerooms the employees worked there for only short periods. Unsatisfactory lighting was restricted to storerooms, passages and sanitary accommodation and was not found to be associated with any particular category of premises. No instances of glare were encountered.

During the month of November, 1965, tests were made with a light meter to obtain readings and the following table summarises the results obtained in fourteen offices and ten shops.

Illumination	Offices	Shops (selling area)	Storerooms	Rest room, stairs, passages
Less than 5 lumens	Nil	Nil	Nil	Nil
5—10 „	Nil	Nil	2	Nil
10—15 „	5	1	2	2
15—25 „	8	6	5	1
More than 25 „	1	3	Nil	Nil

(6) PEST CONTROL

Contracts covering 90 industrial and commercial premises were fulfilled during the year by regular survey and all necessary treatment for the elimination of rats, mice and insect pests. All complaints of surface infestation on local authority premises, about dwellinghouses, shops and commercial and industrial buildings were also dealt with promptly and expenditure was recharged apart from dwellinghouses where Warfarin packs and insecticide packs were issued at a nominal charge.

RODENT CONTROL OPERATIONS

	Type of Property				Agricultural
	Non-Agricultural				
	Local Authority	Dwelling-houses	Other Premises	Total	
No. of Properties	60	18,829	2,190	21,079	6
Properties Inspected on Complaint	18	153	33	204	—
No. found Infested					
Rats	9	101	20	130	—
Mice	9	52	13	74	—
Properties Inspected on Survey	2	—	95	97	1
No. found Infested					
Rats	2	—	80	82	1
Mice	2	—	90	92	1
Total Inspections	51	429	1,261	1,741	12
Number of Infested Properties	20	153	123	296	1
Total Treatments	25	161	1,174	1,360	20

Repeated maintenance treatments of the sewers have reduced the rodent population therein to comparatively small proportions. Whereas in previous years treatments have relied upon Warfarin it was decided upon the advice of the Ministry to change the method during 1965. Accordingly an extended treatment using fluoracetamide was undertaken during May and June using the suspended stockinette bag technique. The results indicated a relatively small infestation which would be further reduced by the direct-acting poison.

SEWER MAINTENANCE TREATMENTS

	1964		1965 May/June
	March	September	
Total number of manholes ...	2,006	2,006	2,006
Number of manholes baited ...	189	143	854
Number of manholes showing			
Prebait take	60	44	—
Partial take	—	—	27
Complete take	21	26	2

Infestations of household pests were found and eliminated in 97 cases of which 32 were Council dwellings. Nine hundred and eighty three visits were made to Council houses and flats for the detection of vermin infestation prior to reletting to fresh tenants.

(7) PUBLIC SAFETY

(a) Dangerous Structures

Prompt action was taken during the year to deal with dangerous structures, notably yard boundary walls which were leaning and defective chimney stacks and chimney pots, eavesgutters, loose overhanging slates etc. Only one serious case of imminent danger had to be dealt with formally and this involved the displaced gable wall and leaning chimney stack of a dwellinghouse which was reported to be moving during gale force winds. The property was in mortgage to the Council and had a limited life but it was decided to call for the rebuilding of the gable wall to obviate an equivalent cost in making good the party wall (4½ inches in thickness) which would have been exposed in the event of demolition. In view of the imminent danger of collapse the family was rehoused temporarily until the gable had been reinstated, and no untoward incident occurred.

(b) Storage of Petroleum

Conditions for the proper storage of petroleum spirit in underground tanks and petroleum mixtures in storage cabinets or fireproof stores were supervised during the year in the course of 119 routine inspections. Only one instance of a leaking tank was reported and this was taken out of use. All new installations were checked and air pressure tests applied to the new tanks. Storage licences were renewed in respect of 145 installations and licence fees amounted to £122 7s. 6d. Replenishment of supplies from road tankers was carried out satisfactorily.

(c) Explosives

There are no stores of explosives within the Borough apart from small stocks which are exempted from the provisions of the Explosives Act. The seasonal sale of fireworks and “shop goods” was again controlled by means of registration of premises and the 64 applicants were given information of precautions to be taken in accordance with the Act.

(d) Public Hire Taxis

Sixteen regulation type taxis were again licensed to ply for hire within the Borough following an annual inspection of the cabs and thorough testing of the vehicles for roadworthiness at the Council’s Vehicle Testing Station. As a result of the examination only minor defects were found and all repairs were executed promptly and were found to be in order on re-inspection. The anticipated heavy demand for taxis at the three sports grounds were catered for by the issue of special licences in respect of taxis licensed elsewhere than in Stretford and at the end of the year steps were being taken to ensure a better taxi service by the approval of additional stands for a trial period, and the provision of telephone facilities if practicable.

(e) Public Mortuary

Under the directions of the County Police 130 bodies were received into the public mortuary during the year 1965. The building is well equipped for this purpose and the conduct of post-mortem examinations. In addition to the general management of the mortuary considerable time is taken up by the identification or viewing of bodies in the chapel. The conduct of the service is efficient and reflects credit on the Council. The certified causes of death are summarised in the following table :—

PUBLIC MORTUARY

Cause of Death					Number of occasions when Mortuary used
Natural Causes	...	...	...	...	112
Accidental Death :					
Fractured Skull	...	...	2	...	
Fractured Neck	...	...	1	...	
Drowning	...	...	1	...	
Burning	...	...	1	...	5
Misadventure :					
Drowning	...	...	2	...	2
Suicide :					
Carbon Monoxide Poisoning			5	...	
Decapitation	...	...	1	...	
Hanging	...	...	1	...	7
Open Verdict :					
Asphyxia	...	...	2	...	
Fractured Neck	...	...	1	...	
Drowning	...	...	1	...	4
TOTAL					130

(8) PUBLIC CLEANSING

(a) Refuse Collection

The collection of house and trade refuse is organised on the daily task system based on a five day week and this ensures that each allotted day's work is completed without fail and a strict weekly collection is maintained. The only disturbance in regularity occurs on National and Bank Holidays and the position is met by overtime working on the nearest Saturday. The production of house refuse is unceasing and the bulk is increasing. Every working day at least 75 tons is collected on the normal rounds whilst additional rubbish is accepted by special collections on request to avoid discarded articles being dumped on open land. Collection from bulk containers of 20 cubic feet capacity originally introduced to cater for storage of refuse at tower blocks of flats has been further extended. Early in the year such collections covered two full working days, Monday and Friday in each week.

Departmental records for the year ended 31st March, 1966, show that the contents of 1,078,311 standard dustbins, 6,605 bulk containers and 1,483 paper sacks were collected during the twelve months. This represents a total of 18,796 tons of house refuse, and an average of more than two tons per loader per day. To facilitate the work of collection defective dustbins are renewed upon complaint as a rate-borne expenditure and 1,279 new dustbins were issued during the year without charge.

(b) Refuse Disposal

The refuse arising at dwellings and shops amounting to almost 19,000 tons together with material accepted from the Highways and Parks Departments was dealt with by controlled tipping on the land acquired for the purpose south of Urmston Lane. Trimming, levelling and consolidation of the refuse is carried out mechanically by means of an hydraulic shovel and a bulldozer, whilst a dumper is available for the transport of covering material. Tipping capacity is being conserved as much as possible in view of the anticipated loss of land on account of the proposed new by-pass road which will cross the site.

(c) Transport

The following machines were employed in the Cleansing Department at the end of the year.

Date Registered	Number	Make of Vehicle	Purchase Price £
1950 September	MTC 499	Dennis Paxit	1,995
1956 February	XTE 870	Dennis Paxit	2,300
1957 March	105 BTE	Dennis Paxit II	2,650
1958 March	701 ETD	Dennis Paxit II	2,750
1958 March	956 ETE	Dennis Paxit II	2,750
1958 May	26 ETJ	Austin Omnivan	648
1959 July	480 KTC	Dennis Side Loader	1,598
1959 September	209 KTJ	Dennis Side Loader	1,598
1959 September	OHL 436	Austin Tipper	989
1960 June	29 NTJ	Dennis Paxit II	2,955
1961 November	544 WTF	Dennis Paxit III	3,725
1962 July	2919 TD	Ford Thames Trader	1,147
1962 December	2564 TE	Dennis Paxit III	3,740
1964 June	FTF 896B	Dennis Paxit III	3,990
1965 April	MTF 266C	Austin Omnivan	604
1965 October	RTE 217C	Dennis Paxit III	3,795
1956 June	—	International Bulldozer	550
1963 October	ATC 135A	Weatherill Hydraulic Shovel	4,062

(d) Salvage Recovery

The following quantities of salvage were recovered and despatched from the Depot during the year under review :—

Material	Weight			Income		
	Tons	Cwts.	Qrs.	£	s.	d.
Kitchen Waste ...	210	6	1	1,003	1	0
Mixed Waste Paper ...	238	11	3	2,031	1	3
Fibre Board ...	74	4	1	760	13	7
TOTAL ...	523	2	1	3,794	15	10

(c) Cleansing Department Establishment

The staffing position was fairly satisfactory during the year but the turnover of labour remained high and the incidence of sickness and absenteeism increased by fifty per cent. Man days lost on account of sickness reached a record figure of 1553 whilst holidays accounted for a further 671 days.

RECORD OF SICKNESS AND ABSENTEEISM

	MAN/DAYS LOST		PROPORTION	
	1964	1965	1964	1965
EMPLOYMENT :—				
Refuse Collection ...	974	1,420	7·0%	9·9%
Refuse Disposal ...	18	80	2·3%	12·2%
Salvage ...	34	45	2·5%	3·4%
Motor Repairs ...	—	—	—	—
Disinfestation ...	14	8	5·0%	3·0%
TOTAL.....	1,040	1,553		

CAUSE OF ABSENCE :—	MAN/DAYS LOST		PROPORTION	
	1964	1965	1964	1965
Accidents	63	139	6·0%	8·9%
Influenza	96	200	9·25%	12·8%
Respiratory Diseases	308	175	29·75%	11·3%
Other Ailments ...	396	748	38·0%	48·0%
Unknown	177	291	17·0%	19·0%
TOTAL.....	1,040	1,553	100%	100%

(9) STAFF

By the end of the year the technical staff of the Department was at full establishment even though two District Public Health Inspectors resigned during the period to take up appointments elsewhere. In addition it was found possible to fill an outstanding vacancy for Housing Inspector. An additional post of Pupil Public Health Inspector newly created during the year was also filled together with the post of Cleansing Foreman made vacant by the unfortunate death of the holder following a short illness. Over a long period of time the Council has been fortunate in attracting a good type of applicant for vacancies and in appointing worthy men and women as officers entrusted with the day to day work of public health in the Environmental Health Service.

